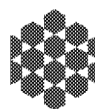


**Witness Name: Caroline
Leonard
Statement No.: WITN3449007
Exhibits: WITN3449008 -
WITN3449021
Dated: 15th August 2019**

Exhibit WITN3449009

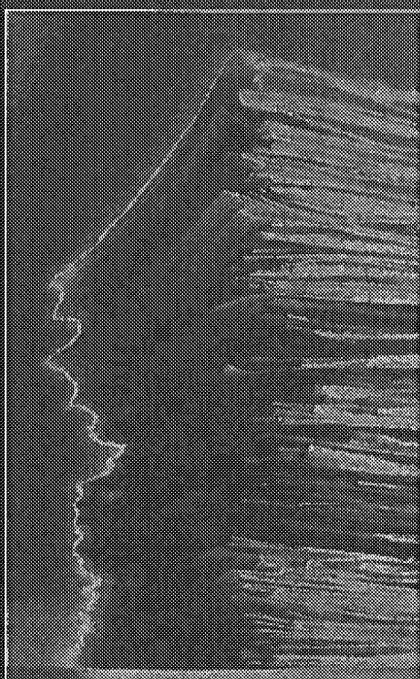


Department of
**Health, Social Services
and Public Safety**

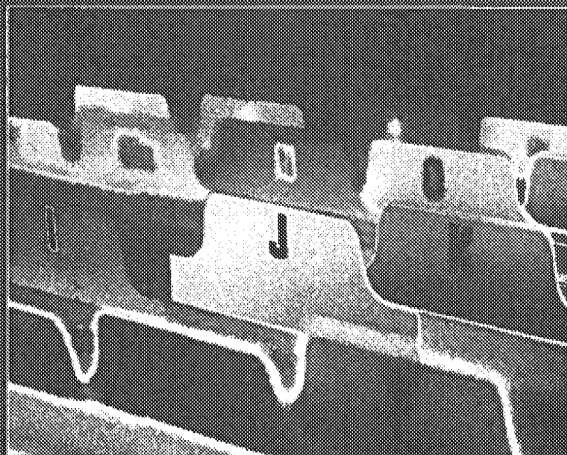
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**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

www.dhssps.ni.gov.uk



Good Management, Good Records



**Guidelines for Managing Records
in Health and Personal Social Services
Organisations in Northern Ireland**

TITLE

None of the

- Files on transfer to other Branches should be routed through L.M.B. Room A37 Castle Buildings.
- Requests for a file to be opened, closed, destroyed or for a title change should be made in writing to L.M.B.
- Any file not in current use should be returned to L.M.B. for P.A.
- Any file can be returned to a Branch within 5 days of Registry receiving a telephone or written request.
- A file should be closed when any of the following apply:
 - (a) the closure time according to your disposal schedule has been reached.
 - (b) its subject matter has come to an end.
 - (c) the file is 2.5cm thick.
 - (d) it is five years old.
 - (e) nothing new has been added to it for two years.
- A continuation file should be opened when (c) applies and maybe when (d) applies.

When a file is being closed the SECTION BELOW MUST BE COMPLETED.


- ☐ Destroy in Month _____ Year _____
- ☐ Normal Review Process. (FILES WILL BE RETURNED TO OWNING BRANCHES FOR THE REVIEW PROCESS)
- ☐ Permanent Preservation --Within the Department
- ☐ Transfer to PRONJ on Month _____ Year _____ for Permanent Preservation

Signed _____ Name (Please Print) _____

Grade (or non Staff Officer) _____ Branch _____ Date ____ / ____ / ____

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THIS FILE IS BOUND BY THE PUBLIC RECORD ACT (PRA) 1923



FOR "CLOSED" ACTION ONLY		
YEAR OF FIRST PAPER		
YEAR OF LAST PAPER		
FIRST REVIEW	YEAR	INTLG
SECOND REVIEW		

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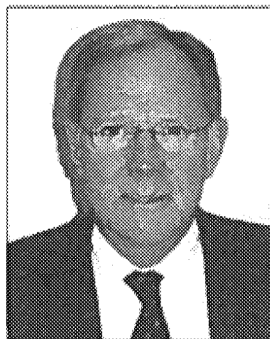
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FOREWORD

I. The Importance of Records Management in the HPSS

Records management is most effective when it commands commitment from senior managers and all HPSS staff regard it as a professional activity requiring specific expertise and good practice.

Records are a valuable resource because of the information they contain. Information is essential to the delivery of high quality evidence based health and social care on a day-to-day basis. An effective records management service ensures that such information is properly managed and is available whenever and wherever there is a justified need for information, and in whatever media it is required:



Dr Ian Carson, Chairman of the Health and Social Care Records Steering Group

- to support patient/client care and the continuity of care;
- to support day-to-day business which underpins delivery of care;
- to support sound administrative and managerial decision-making, as part of the knowledge base for HPSS services;
- to assist medical, social and other audits;
- to support improvements in clinical and social care effectiveness through research and also support archival functions by taking account of the historical importance of material and the needs of future research;
- to support the planning for and development of new services; and
- to provide accountability.

Recent legislation in the form of the Freedom of Information Act 2000 has also added a new imperative for efficient and effective records management practice.

"Any freedom of information legislation is only as good as the quality of the records to which it provides access. Such rights are of little use if reliable records are not created in the first place, if they cannot be found when needed or if the arrangements for their eventual archiving or destruction are inadequate"¹.

All HPSS bodies and those organisations carrying out functions on behalf of the HPSS have a common law duty of confidence to patients/clients and must ensure adherence to these Records Management Standards and Guidelines.

II. What needs to be done to achieve the best standards?

Managers in all disciplines need to provide training and information to ensure that staff are aware of and working to the current rules on such issues as Data Protection and Access to Patient/Client Information. Staff should also be reminded of the vital role that records play in delivering health and social care. As the Northern Ireland Audit Office Report into Compensation Payments for Clinical Negligence issued on 5th July 2002 has shown, there is considerable room for improvement as many HPSS organisations have failed to look after their records properly. This document and its appendices are targeted at helping to achieve these necessary improvements. Each organisation should have a comprehensive records management programme which includes cost-effective management of closed as well as active records, and which takes account of the risk management strategy of their service area/unit/branch/division/directorate/departments. For the purposes of this guidance we will use the word branch (see Glossary for further explanation).

Senior managers must ensure that all staff are involved in this programme, which should encompass:

- profile raising and publicity;
- appropriate resources including training;
- review of procedures and implementation plan for specific actions arising; and
- monitoring individual and organisational compliance.

¹

Part 1(iii) Lord Chancellor's Code of Practice on the Management of Records under Section 46 of the Freedom of Information Act 2000

III. What must be recorded?

All work done (ie activity carried out or provided) by HPSS staff must be recorded and held in registered files. These files constitute the records of the organisation. Each file should make up a comprehensive record of what was done, how it was done and why. Files should also evidence any actions and decisions that were rejected and why.

All official records with the exception of some special category records mentioned in Section 8.1 of this Guidance, must be kept on paper. Prior to the implementation of Electronic Document and Records Management Systems approved by the National Archives (London), electronic records cannot be accepted as the definitive record.

Generally, any item should be kept in a registered file that:

- contains information or work relating to a file subject;
- shows the reasons why something has been accepted or rejected or why something has been done or not done;
- shows who was involved in the decision making or work done;
- contains financial papers, statistics, or treatment and care relating to the file subject;
- relates to the success or failure of any work or project associated with the file subject, or success or failure to meet targets, standards or other criteria.

'The Code of Practice on the Management of Records under Section 46 of the Freedom of Information Act 2000' issued by the Lord Chancellor's Department (now called the Department of Constitutional Affairs) states that:

"8.2 Records of a business activity should be complete and accurate enough to allow employees and their successors to undertake appropriate actions in the context of their responsibilities, to

- facilitate an audit or examination of the business by anyone so authorised;*
- protect the legal and other rights of the authority, its clients and any other person affected by its actions; and*
- provide authenticity of the records so that evidence derived from them is shown to be credible and authoritative".*

iv. Legal Requirements

Public Records Act (Northern Ireland) 1923

All HPSS records are public records under the terms of the Public Records Act (Northern Ireland) 1923. Chief Executives and senior managers of all HPSS organisations are personally accountable for records management within their organisation. They have a duty to make arrangements for the safe keeping and correct disposal (under the Disposal of Documents Order (Northern Ireland) 1925) of those records under the overall supervision of the Deputy Keeper of Public Records whose responsibility includes permanent preservation.

Freedom of Information Act 2000

The Freedom of Information Act 2000 creates a statutory right of access by the public to all records held by public bodies (with some exemptions). The Act makes provision for the Lord Chancellor to issue guidance on how records systems should be maintained in order to facilitate public access to information held. In particular S46(1) states:

"The Lord Chancellor shall issue, and may from time to time revise, a code of practice providing guidance to relevant authorities as to the practice which it would, in his opinion, be desirable for them to follow in connection with the keeping, management and destruction of their records".

The Act is brought fully into force on 1 January 2005. The HPSS has two main responsibilities under the Act. The HPSS has to maintain its 'Publication Scheme' (effectively a guide to the information which is publicly available) and staff have to deal with individual requests for information when the general right of access comes into force.

Anyone will be able to make a request for information, although the request must be made in writing (including email) but an Environmental Information Regulation (EIR) request may be verbal. The request must contain details of name and address of the applicant and the information sought.

The HPSS is obliged to produce information recorded both before and after the Act was passed. It is vital that records are held within a structured Records Management system in order to meet the HPSS's obligations under the Act. It should be noted that the responsibility for responding to information access requests lies with the authority who holds the information.

The Act is intended to change the way in which public authorities do business, making them more accountable. The foreword to the Code of Practice on Records Management published by the Lord Chancellor under Section 46 of the Act states:

"Any freedom of information legislation is only as good as the quality of the records to which it provides access".

This highlights the importance of good Records Management in the HPSS.

Further information on the Freedom of Information Act is available from:

www.lcd.gov.uk

The Information Commissioner enforces and oversees the Data Protection Act 1998 and the Freedom of Information Act 2000. The Commissioner is a UK independent supervisory authority reporting directly to the UK Parliament and has an international role as well as a national one. In the UK the Commissioner has a range of duties including the promotion of good information handling and the encouragement of codes of practice for data controllers, that is, anyone who decides how and why personal data (information about identifiable, living individuals) are processed.

In April 2003 the Information Commissioner appointed Marie Anderson as Assistant Commissioner in Northern Ireland. The appointment recognised that local issues and sensitivities need to be fully understood and integrated into the promotion of good information handling across the UK.

www.informationcommissioner.gov.uk

www.foi-uk.org

<http://extranet/FreedomofInformation/default.htm>

Environmental Information Regulations (Northern Ireland) 1993 (Statutory Rule 1993 No. 45)

The Environmental Information Regulations (Northern Ireland) 1993 Regulation 4 creates a statutory obligation to provide freedom of access to, and dissemination of, information on the environment held by public authorities or bodies. This includes, for example, information on emissions, chemicals used and waste disposal arrangements. The Regulations specify maximum response times and oblige public authorities to establish systems to ensure that they can locate, retrieve and release environmental information on request.

The Regulations are currently being revised to incorporate the requirements of the European Council Directive 90/313/EEC on the freedom of access to information on the environment and the environmental information provisions of the 'Aarhus Convention'.

Further information on environmental information regulations is available from:

www.defra.gov.uk

Limitations (Northern Ireland) Order 1989

The Limitations (Northern Ireland) Order 1989 sets out the statutory provisions governing the time limits for bringing a claim against another. This means that records should be kept for as long as is necessary to facilitate the requirements of the Order. The main provisions of the order are:-

- The limitation period for a claim based on contract is 6 years (Article 4). This is the rationale behind keeping invoices, etc for that length of time;
- The limitation period for a claim for personal injury caused by negligence is 3 years from the date of injury, or, if later, 3 years from the date of "knowledge" of the person injured. This date of knowledge is the date when the injured person first had knowledge that the injury was significant and attributable wholly or partly to the alleged negligence (Article 7);
- The limitation period for a claim for negligence, not involving personal injury is 15 years (Article 12). An example of this would be the giving of negligent financial advice which caused economic loss rather than personal injury;
- The limitation period for actions founded on instruments under seal is 12 years (Article 15). Some agreements made by departments may well fall into this category;
- The limitation period for actions to recover an interest in land is 12 years (Article 21). This period is extended to 30 years where the Crown is seeking to recover interest in land.

There are some cases where the time limit is extended.

- Article 47 provides that time does not begin to run whilst a person is "under a disability", that is to say is not of full age (ie under 18) or of unsound mind (ie incapable of managing/administering his/her own affairs);
- Article 48, combined with Article 47, above has the effect that a personal injury claim may be brought by a person any time before he/she attains 21, irrespective of how early in his life the injury was caused;
- Article 50 gives the court discretion to override certain time limits. In deciding whether to exercise its discretion in favour of a person bringing a claim, the court must have regard to the length of and the reasons for the delay, the conduct of the parties and any steps taken to obtain advice;
- Article 71 provides where there is fraud or deliberate concealment, the time does not begin to run until the "victim" discovered it or could with reasonable diligence, have done so.

Data Protection Act 1998

The 1998 Data Protection Act places a statutory responsibility on all HPSS organisations to protect the personal data which they hold. In relation to records management this means that organisations must implement measures to:

- maintain the accuracy of records held;
- protect the security of personal data;
- control access to the personal data; and
- make arrangements for secure disposal once the record is no longer required.

Confidentiality and Data Protection Act

All HPSS bodies and those carrying out functions on behalf of the HPSS have a common law duty of confidence to patients/clients and a duty to maintain professional ethical standards of confidentiality. Everyone working for or with the HPSS who records, handles, stores or otherwise comes across personal information has a personal common law duty of confidence to patients/clients and to his/her employer. The duty of confidence continues even after the death of the patient/client, or after an employee or contractor has left the HPSS.

The Data Protection Act 1998 (DPA 1998), which replaced the earlier DPA 1984, extended its coverage to include both computer records and manual records of relevant filing systems. The Act, which applies to the whole of the

United Kingdom, sets out requirements for the “processing” of personal data (ie meaning obtaining, recording or holding the information or data or carrying out any operation or set of operations on the information or data). A “data subject”, namely, a living individual who is the subject of personal data, has a right of access to their personal data and, in certain circumstances, can have their data corrected or even deleted.

There are 8 basic data protection principles to be followed by anyone “processing” data, namely:

- Personal data shall be processed fairly and lawfully and, in particular, shall not be processed unless at least one of the conditions in Schedule 2 to the Data Protection Act 1998 is met, and, in the case of sensitive personal data, at least one of the conditions in Schedule 3 to the same Act is also met;
- Personal data shall be obtained only for one or more specified and lawful purposes, and shall not be further processed in any manner incompatible with that purpose or those purposes;
- Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed;
- Personal data shall be accurate and, where necessary, kept up to date;
- Personal data processed for any purpose or purposes shall not be kept for longer than is necessary for that purpose or those purposes;
- Personal data shall be processed in accordance with the rights of data subjects under this Act;
- Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data;
- Personal data shall not be transferred to a country or territory outside the European Economic Area unless that country or territory ensures an adequate level of protection for the rights and freedoms of data subjects in relation to the processing of personal data.

Schedules 2 and 3 to the Act set out conditions, respectively, for the processing of personal data and sensitive personal data.

The Information Commissioner, who has responsibility for the enforcement of this legislation, provides guidance on the application of the Act.

Further information on the Data Protection Act is available from the Information Commissioner at:

www.informationcommissioner.gov.uk

Other legislation

Other legal obligations exist in respect of particular classes of records. This guidance and its appendices will help managers to appreciate and carry out their obligations for all types of records within their care.

v. Available Guidance

Further guidance and good practice on records management can be found in the following sources:

Good Management, Good Records

These guidelines offer an overview of the key issues and solutions, and best practice for HPSS teams to follow when preparing a records management strategy. It represents the joint DHSSPS and PRONI view of how records should be administered and sets the standard required of the HPSS.

The Disposal Schedule has been approved by PRONI. It sets out minimum retention periods for HPSS records of all types, except for GP medical records, and indicates which records are most likely to be appropriate for permanent preservation. It also explains the reasoning behind the determination of minimum retention periods, including legal requirements where relevant.

The Schedule does not replace the requirement for HPSS organisations to develop and agree their own disposal schedules with PRONI, however, it should form the basis for such schedules.

Northern Ireland Records Management Standard (NIRMS)

This standard details the records management policies and procedures which the PRONI expect of public authorities in Northern Ireland. Good Management, Good Records is substantially based on NIRMS but copies of the actual standard together with supporting documentation is available from:

www.proni.gov.uk

Lord Chancellor's Code of Practice on the Management of Records, issued under Section 46 of the Freedom of Information Act 2000

The Lord Chancellor's Code of Practice on the Management of Records has been produced under Section 46 of the Freedom of Information Act 2000. The aims of the code are:

- to set out the practices which public authorities, and bodies subject to the Public Records Act 1958 and the Public Records Act

(NI) 1923 should follow in relation to the creation, keeping, management and destruction of their records (Part 1 of the Code); and

- to describe the arrangements which public bodies should follow in reviewing public records and transferring them to the Public Record Office or to places of deposit or to the Public Record Office of Northern Ireland (Part II of the Code).

The Code of Practice provides the benchmark of good record keeping practice, which is likely to be used, if necessary, to assess compliance with the requirements of the Freedom of Information Act 2000.

Copies of the Code of Practice are available from the Lord Chancellor's web site:

www.lcd.gov.uk

A model action plan for developing records management compliant with the Code of Practices is available from the National Archives web site:

www.nationalarchives.gov.uk

British Standard BS ISO15489-1:2001

This British Standard reproduces verbatim ISO15489-1:2001 and implements it as the UK National Standard. This provides standardisation of best practice in records management policies and procedures to ensure that appropriate attention and protection is given to all records, and that the evidence and information they contain can be retrieved more efficiently and effectively, using standard practices and procedures.

vi. Future Developments

These guidelines will be updated (or replaced) to keep pace with future developments arising from changes in the organisation and management of the HPSS, the application of the Data Protection Act 1998 and the Freedom of Information Act 2000.

1. INTRODUCTION

The Chief Executive of the Public Record Office of Northern Ireland (PRONI), Dr. Gerry Slater has recently said:

"We hear often that we live in the Information Age. Everywhere we turn, it is emphasised that more and more information is available on this-or-that subject. Behind this lies the reality that information, that the records containing that information, must be managed – from creation, through the meeting of on-going business needs, to the moment when the decision is made as to disposal, whether destruction or permanent preservation"

These guidelines draw on the Northern Ireland Records Management Standards, published by PRONI, the Lord Chancellor's Code of Practice on the Management of Records under Section 46 of the Freedom of Information Act 2000 and the experience of the Department of Health, Social Services and Public Safety (DHSSPS).

The guidelines provide:

- A framework for consistent, coherent and compatible records management within the HPSS;
- a set of values with robust yet flexible (where appropriate) standards;
- integration with other co-developing initiatives, legal, organisational and technological;
- a reference point against which continual improvement and consultation can take place.

All Health and Personal Social Services (HPSS) records are public records under the terms of Public Records Act (Northern Ireland) 1923. The Act sets out the broad responsibilities for everyone who works with such records. The HPSS has a statutory duty to make arrangements for the safe keeping and eventual disposal of its records. In practice PRONI provides advice on how to manage all types of HPSS records.

2. THE PRINCIPLES OF RECORDS MANAGEMENT

2.1 Records are created, received and used in the conduct of business activities. To support the continuing conduct of business, patients and client care, comply with the regulatory environment, and provide necessary accountability, organisations should create and maintain authentic, reliable and usable records, and protect the integrity of those records for as long as required. To do this, organisations should institute and carry out a comprehensive records management programme which includes:

- a) determining what records should be created in each business process, and what information needs to be included in the records,
- b) deciding in what form and structure records should be created and captured, and the technologies to be used,
- c) determining what metadata should be created with the record and through records processes and how that metadata will be persistently linked and managed,
- d) determining requirements for retrieving, using and transmitting records between business processes and other users and how long they need to be kept to satisfy those requirements,
- e) deciding how to organise records so as to support requirements for use,
- f) assessing the risks that would be entailed by failure to have authoritative records of activity,
- g) preserving records and making them accessible over time, in order to meet business requirements and community expectations,
- h) complying with legal and regulatory requirements, applicable standards and organisational policy,
- i) ensuring that records are maintained in a safe and secure environment,
- j) ensuring that records are retained only for as long as needed or required, and
- k) identifying and evaluating opportunities for improving the effectiveness, efficiency or quality of its processes, decisions, and actions that could result from better records creation or management.

2.2 Rules for creating and capturing records and metadata about records should be incorporated into the procedures governing all business processes for which there is a requirement for evidence of activity.

2.3 Business continuity planning and contingency measures should ensure that records that are vital to the continued functioning of the organisation are identified as part of risk analysis, protected and recoverable when needed.

3. GOOD RECORDS MANAGEMENT

3.1 Records are valuable because of the information they contain. That information is only usable if it is correctly and legibly recorded in the first place, is then kept up to date, and is easily accessible when needed. The following sections, together with the HPSS Disposal Schedule in Appendix A, identifies the specific actions, managerial responsibilities, and minimum time periods for the effective management of records from creation, through day-to-day use, selection, storage, maintenance and finally, disposal.

3.2 Good record keeping ensures that:

- you can work with maximum efficiency without having to waste time searching for information;
- there is an "audit trail" which enables any record entry to be traced to a named individual at a given date/time with the secure knowledge that all alterations can be similarly traced;
- those coming after you can see what has been done, or not done, and why;
- any decisions made can be justified or reconsidered at a later date;
- the records are secured against tampering or unlawful deletion.

3.3 This is vitally important in cases such as:

- providing patient/client care;
- providing social care;
- clinical professional liability;
- parliamentary accountability;
- purchasing and contract or service agreement management;
- financial accountability;
- disputes or legal action.

3.4 It is therefore vital that you always:

- record any important and relevant information, making sure that it is complete;

- ensure that it is legible so that it can be read easily and reproduced when required;
- put it where it can be found when needed;
- keep it up to date;
- if necessary and appropriate, share information in accordance with the requirements of the Data Protection Act 1998;
- suitably dispose of records as soon as possible in accordance with your organisation's PRONI approved Disposal Schedules.

All staff have a responsibility for Records Management.

4. ROLES AND RESPONSIBILITIES

4.1 The Permanent Secretary

The overall responsibility as Accounting Officer for the Health and Personal Social Services (HPSS) lies with the Permanent Secretary of the Department of Health, Social Services and Public Safety. The Accounting Officer is responsible for the propriety and regularity of public finances in the HPSS; for the keeping of proper accounts; for prudent and economical administration; for the avoidance of waste and extravagance; and for the efficient and effective use of HPSS resources.

The Accounting Officer is supported by Accountable Officers in HPSS bodies who are formally the Chief Executives of these organisations. Their role is very similar to that of the Accounting Officer and the individuals undertaking this role are required to observe the same general requirements that are laid down for the Accounting Officer and to ensure that the relevant HPSS body's staff also abide by them.

4.2 The Chief Executive and Senior Managers of HPSS Organisations

The Chief Executive and all Senior Managers are personally accountable for the quality of records management within their organisation, and have a duty to make arrangements for the safekeeping and eventual disposal of those records, under the overall supervision of the Deputy Keeper of Public Records at PRONI.

All Senior Managers are responsible for ensuring that their staff are aware of their personal responsibilities for record keeping. This includes the creation, use, storage, security and confidentiality, and disposal of records.

4.3 Lead Senior Manager for Records Management

Every HPSS organisation should identify a senior manager who will take the lead in developing the organisation's record management capability. This Manager will be responsible for:

- co-ordinating, publicising and monitoring implementation of the records management strategy and reporting on a regular basis to the Board;
- determining the type of system appropriate to allow effective and efficient discharge of functions while meeting the statutory duty of records management;
- ensuring that the systems in place for records management are monitored and reviewed by the Senior Management Team (SMT) and the Board at least annually in order to make improvements to the system.

4.4 Records Management Officer (RMO)

Every HPSS organisation should appoint a designated Records Management Officer with overall responsibility and authority for records management in the organisation. This Records Management Officer will provide guidance and assistance to the local records managers who will have responsibility for the day-to-day management of records in their own branches. This officer has overall responsibility for all the records of the organisation from the time of their creation or their being received until their destruction or transfer to PRONI. It is also the responsibility of the Records Management Officer to:

- ensure the statutory requirements as laid down in the Disposal of Documents (Northern Ireland) Order 1925 (made under the Public Records Act (Northern Ireland) 1923 for the destruction and preservation of records), are fulfilled;
- co-ordinate the development and maintenance of the organisation's Disposal Schedules in liaison with Local Records Managers;
- ensure that there is a regular reviewing and destruction of records in accordance with Disposal Schedules;
- give guidance to staff reviewing records to ensure consistency in the decision made;
- maintain proper records management procedures and ensure consistency in the management of records;
- arrange for the training and awareness of staff in records management, in conjunction with PRONI;
- ensure that appropriate records are excluded from public access;
- provide the central co-ordination point for all off-site storage of non-financial records;
- maintain the file category thesaurus;
- provide the single contact point for liaison with PRONI; and
- develop professional standards and liaise with colleagues within the HPSS to develop best practice.

4.5 Local Records Managers

Each branch must identify, in liaison with the Records Management Officer, a member of staff who will be responsible for overseeing the day-to-day management of records within that branch in accordance with the overall Organisational Policy on Records Management. In particular Local Records Managers will be responsible for:

- liaising with the RMO, to develop and maintain a PRONI approved Branch Disposal Schedule;
- providing advice to staff on records management procedures;
- maintaining branch file storage facilities;
- the creation of new branch files;
- logging file transfers between staff members;
- closing files in line with this guidance;
- arranging off-site storage including file retrieval and maintaining records of files held off-site via the RMO;
- ensuring that branch files are disposed of in accordance with the branch's Disposal Schedule.

4.6 Individual Members of Staff

Every member of staff employed within the HPSS is responsible for maintaining records in accordance with the HPSS Records Management Policy. In particular:

- a) following the procedures agreed with the Local Records Manager (LRM) for the creation of new files;
- b) no member of staff may destroy a file other than in accordance with the organisation's Disposal Schedule; and
- c) all staff must document and record their work in accordance with the HPSS Records Management Policy.

4.7 Public Record Office of Northern Ireland (PRONI)

The Public Records Act (Northern Ireland) 1923 made PRONI responsible for the records of any Court, Government Department, Authority or Office in Northern Ireland over which the Parliament of Northern Ireland has the power to legislate. It is therefore a statutory

requirement for the HPSS to implement records management as set out in this Act and in the Disposal of Documents (Northern Ireland) Order (1925). This legislation means that PRONI has an overarching responsibility within the public sector in Northern Ireland to ensure that records are managed in accordance with agreed policies and procedures. In particular:

- PRONI is concerned with identifying any deficiencies in the way records are organised and maintained and in records management procedures as a whole. PRONI is available to assist and advise on records management procedures;
- PRONI must be involved in:
 - quality assurance of all Disposal Schedules;
 - the updating of Disposal Schedules;
 - the sampling of particular instance papers (case files);
 - ensuring the proper use of microfilm and other non-paper based storage media;
- Officers in PRONI and the Public Body, and the Permanent Secretary of the parent Department for PRONI (Department of Culture, Arts and Leisure (DCAL)), will be signatories to the Disposal Schedule;
- the Records Management Officer will monitor the implementation of an agreed Disposal Schedule and will advise PRONI if regular reviews are not being carried out;
- Public Bodies are responsible for assessing the administrative need for the retention of records, the assessment of records for historical/research purposes is the responsibility of PRONI;
- PRONI will be responsible for the storage of records identified for permanent preservation and which are no longer required by the HPSS for administrative purposes.

4.8 Implementation should be proportionate and appropriate

This guidance will by necessity be applied differently, according to the individual circumstances of each HPSS organisation. For example, smaller

organisations may find that the role of Records Management Officer is best performed as part of the duties of one or a number of existing managers. What is important is that:

- senior management takes active responsibility for records management;
- the resources devoted to records management are adequate for the work to be done;
- legal obligations are met; and
- policies and procedures are carried out consistently and appropriately.

5. THE PROCESS OF RECORDS MANAGEMENT

5.1 What is Records Management?

Records management is systematic and consistent control of all records throughout their lifecycle.

Systematic -	Records need to be managed in a planned and methodical way by design rather than by accident.
Consistency of approach -	Records of the same kind should be managed in the same way. For example, correspondence about something important is important whether it be a letter, handwritten or typed, or an email message. Whether electronic or paper, the management of the record must be consistent.
Consistency over time -	Managing records is always worth doing whether resources are adequate or scarce.
Control -	Everything that happens to records needs to be controlled, how they are produced, received, organised, registered, stored and retrieved, retained, destroyed or permanently preserved.
All Records -	This includes documents and all the other things which can be described as records. Active ones and inactive ones, formal ones and informal. All of them.

5.2 Vital Elements

There are five vital elements of records management:

- public records legislation;
- managing records as a valuable and expensive asset;
- meeting business and patient/client needs; and
- accountability for practice and service provision; and
- accountability and quality of information and services.

6. RECORDS MANAGEMENT PRACTICES

6.1 What is a Record?

Records are documents or other items containing information that has been received, created or maintained by an individual or an organisation as evidence of a business activity, patient/client care, treatment given, treatment planned.

In the context of this guidance, a record is anything which contains information (in any media) which has been created or gathered as a result of any aspect of the work of HPSS employees – including consultants, agency, or casual staff.

HPSS records are public records as defined in the Public Records Act (Northern Ireland) 1923. "HPSS" or "public" record is a record of information created by the activities of the HPSS and conveyed by any means (manuscript, typescript, email, film, magnetic tape, map, plan, drawing, account, and ledger).

6.2 Why do you need to keep records?

Records enable the HPSS to:

- conduct business in an orderly, efficient and accountable manner;
- deliver services in a consistent and equitable manner;
- support and document policy formation and managerial decision-making;
- provide consistency, continuity and productivity in management and administration;
- facilitate the effective performance of activities throughout the HPSS;
- provide continuity in the provision of services or care, treatment or services;
- provide continuity in the event of a disaster;
- meet legislative and regulatory requirements including archival, audit and oversight activities;
- provide protection and support in litigation including the management of risks associated with the existence of or lack of evidence of HPSS activity;

- protect the interests of the HPSS and the rights of employees, patients, clients, and present and future stakeholders;
- support and document current and future research, and document activities, developments and achievements, as well as historical research;
- provide evidence of business, personal and cultural activity;
- establish business, personal and cultural identity;
- maintain corporate, personal or collective memory.

6.3 Integrity of Records

It is the responsibility of each HPSS body to ensure that all records are complete and authentic and, in addition, to be satisfied that all correspondence is present and kept in the correct order. The records **must**:

- provide adequate evidence of the conduct of business to account for a financial transaction including reasons for any decision(s) necessary for that transaction to take place;
- contain verifiable evidence that the transaction was properly authorised;
- provide complete information to document the transaction;
- comply with record-keeping requirements arising from the regulatory and accountability directions of the body; and
- be comprehensive and document the complete activity i.e. contain a full audit.

A record should accurately reflect what was communicated or decided, or what action was taken. It should be able to support the needs of the business to which it relates and be used for accountability purposes. The record should be authentic and reliable.

6.4 Preservation of Records

Not all papers of a “public nature” are worthy of preserving permanently. All papers created in, or received by, the HPSS have to be examined in order that those which are of no administrative or historical value are not permanently preserved in high-cost storage. This document contains information on the creation, maintenance, disposal, review and retention of records.

The Disposal Schedule in Appendix A has been drafted in consultation with representatives from the HPSS and PRONI. PRONI, which is the legal body responsible for regulating the disposal of HPSS records have formally agreed the Disposal Schedule.

PRONI has identified records which they want to preserve. As medical technologies and care advances are made PRONI wish to preserve records of individual precedent cases. These records should be identified at the earliest point and marked in some distinctive way to ensure they are transferred to PRONI after the minimum retention period has elapsed.

The Disposal Schedule also outlines the records of a more corporate nature which PRONI wish to preserve, or review to determine their preservation value.

6.5 Microfilming Records

Microfilm records can be certified as providing legally admissible archival documents but specific standards of microfilming of records need to be met. The National Preservation Office (allied to the British Library) has produced standards (Guide to Preservation Microfilming 2000) for preservation microfilming which are acceptable to archive institutions throughout the UK.

6.5.1 The Public Record Office of Northern Ireland advises that the paper copy should be treated as the definitive record eligible for transfer to PRONI for permanent preservation where the final action as recorded on the Disposal Schedule in Appendix A is:

- Determined on Review or
- Transferred to PRONI.

Where the record is microfilmed, the paper copy should be retained.

Where PRONI has no long term interest in the record, microfilm can be treated as the definitive record, provided specific microfilming standards are adhered to.

6.6 Registration of Records

Registration is a system which allocates a unique identifier (numerical and alphabetical prefix) to each record and which annotates that sequentially in a 'register' or index.

6.6.1 What is the purpose of registering HPSS records?

The primary purpose of registration is to provide evidence that a record has been created or captured in a records system and to facilitate retrieval.

The establishment of a coherent file system provides for faster and systematic filing, faster retrieval of information, greater protection of

information and increased administrative stability, continuity, efficiency and public accountability.

Such systems need to provide complete and accurate information on all transactions which occur in relation to a particular record.

These include:

- registration;
- protective markings;
- changes in description, contents etc;
- disposal;
- activity levels; and
- pattern and duration of use.

Determining which system to use is a decision which needs to be based upon the amount of records in operational areas, an analysis of the organisation's requirements to maintain accountable records of particular activities and its information needs. The Northern Ireland Records Management Standard (NIRMS) gives guidance on the type of system appropriate to the organisation needs.

6.6.2 What are the best practices in Registration?

The best practices in registration are:

- the file title must be unique;
- the title should be restricted to no more than four elements;
- the reference identity assigned to each file must be unique and must include the year of opening as an element;
- both must be relevant to and easily understood by all users;
- each element should relate to a different hierarchical level of the file title;
- details should be recorded both on the file cover and the register;
- at a *minimum* the file description must identify:
 - its title
 - its registration identifier

- the date it was registered (opened)
- the date it is due to be closed and reviewed, destroyed or transferred to PRONI.

6.7 Classification System

One of the critical success factors in a filing system that really works is that the classification method reflects and supports the organisation's business functions and activities. The two golden rules for organising files within the classification system are:

- Separate records from reference materials (records must be retained in line with the retention policy outlined in Appendix A); and
- Separate policy files from operational files or case files.

The Disposal Schedule in Appendix A classifies the records into work areas. The work area then becomes the method of classifying the records e.g.

Work area – Accident/Incident/Untoward Events

This work area identifies all the records created by the HPSS in relation to accidents, incidents, untoward events, including the record sheets, report forms, books and RIDDOR registers.

6.8 File Titles

Accurate file titling is essential for an efficient filing system.

The title of every file should:

- accurately reflect its contents;
- be as specific as possible;
- indicate both the information content and the types of documents e.g. Personnel Committee – 'agenda and minutes' rather than just Personnel Committee.

If titles are inaccurate, ambiguous or imprecise then retrieval of information will be difficult, staff time will be wasted and eventually staff will lose confidence in the system, resulting in an increase in the number of duplicate files and unregistered files created.

6.8.1 How to title a file

A structural approach to file titling based on a maximum of four elements, each relating to the functional areas of the HPSS or subject matter is recommended.

1st element – should indicate the operational area to which the record refers. We recommend that the branch name/business area be used as the first element.

2nd element – should be the appropriate work area as authorised on the disposal schedule (see Appendix A).

3rd element – should be added to make the title more precise.

4th element – if needed it should be added to define the title further e.g. inclusion of a specific time period. Where at all possible files should be restricted to a calendar or financial year. This means the closure and disposal of the file can be better managed.

Titles should be meaningful. Don't use words like 'general' (which indicates you don't know what it should be) or 'miscellaneous' (which indicates you can't be bothered to think about it). Titles should also be as simple and as short as possible. If to be meaningful and accurately reflect the contents, the title is too long consider splitting it into two files either by content or document type.

All abbreviations or acronyms should be spelt out in full.

6.9 Types of Files

Case files contain different types of documents which all relate to one individual person or thing – for example, an employee, a supplier, a patient/client - and which need to be kept together for ease of reference and use. For example:

- employee files in personnel departments;
- supplier files in a purchasing department;
- patient files in a hospital or community setting;
- client files in a day centre or community setting.

Everything which is not related directly to a patient/client or member of staff, falls into the other types of files. These are covered by all the work areas in Appendix A with the exception of Health, Acute and Community, and Social Services adult and Social Services children.

6.10 File Covers

The format of all file covers being used in the HPSS must be agreed with PRONI. The cover of every file should:

- state the year in which it was opened;
- state the date it was closed;
- be marked if closed;
- state the date of first paper;
- state the date of last paper (this date governs the dates of first and second review);
- new file number/former file number (if appropriate); and
- facilitate identification as a precedent case.

The design of new files should incorporate boxes as shown below.

FOR CLOSURE ACTION ONLY		
Year of First Paper		
Year of Last Paper		
	Year	Initials
First Review Due		
Due Destruction Date		
Date of Transfer to PRONI		

When a file is being closed the disposal schedule should be consulted and either the First Review date, date the file is due for destruction or date the file is due to be transferred to PRONI noted on the cover.

6.11 Closing a File

ALL files should be closed no later than 5 years after opening (with some exceptions e.g. patient/client case files, personnel files relating to individual employees). Once a file is closed no further papers should be added. A yellow closure sheet (see Appendix D, which should be reproduced locally on yellow paper) must be inserted to every file closed. This reminds staff

requesting a closed file that no further papers should be added. At this stage you should record the date of the earliest and latest papers; and

- the date of first Review;
- the date file is due to be destroyed; or
- the date the file should be transferred to PRONI, whichever is appropriate, should be recorded on the file cover.

The word closed should be stamped on the outside of the file, using a 'closed' rubber stamp. If, when a file is being closed, the subject to which it relates remains 'live' a continuation file should be opened.

6.12 When is a file closed?

A file is closed:

- as directed on Disposal Schedules. (Local disposal schedules should advise when files should be closed);
- when it has been opened for five years. (The maximum time for which a file can remain open is 5 years. If it has not been closed prior to this it must be closed when it is five years old. Exceptions to this rule will be patient/client case files, personnel files relating to individual employees);
- the depth of papers reaches 2.5cm limit. File covers are designed to be a protection for the records contained within. When the depth of papers reaches more than 2.5cm the file becomes hard to manage. Where this is the case the file should be closed and a continuation file opened;
- the subject matter is finished. Files should be time bounded to calendar or financial years, where possible. Files in this scenario should be closed at the end of each calendar/financial year and a new file opened if necessary for the next year. There will be other times when a subject is finished for example:
 - when a Service Level Agreement is signed and completed the file can be closed and a new one opened when the agreement is being revised;
 - when development of the organisation's publication scheme is agreed and published the file should be closed. A new file should be opened the next time the publication scheme is being addressed.
- no new papers have been added to the file for two years. Where this is the case the file should be closed. A new file can be opened again

if it becomes appropriate. Exceptions to this rule will be patient/client case files, personnel files relating to individual employees.

6.13 How are Registered files managed?

Branches may hold files that are in current use and these files may be kept in a branch local filing system, and suitably stored at the end of the working day.

Any Protectively Marked files for example confidential patient/client records kept in the branch must be stored in a suitable manner.

Files not in current use should be stored in a Registry facility within each organisation, locally, or off-site subject to safeguards and traceability, retrievability.

The Public Record Office of Northern Ireland in Balmoral Avenue, Belfast, stores files selected by them for permanent preservation.

6.14 Who is responsible for filing?

You are. Everyone has a responsibility to ensure that all records are put in the correct order in the appropriate files, irrespective of the position they hold in the HPSS.

If you initiate a document, you are responsible for filing it, or ensuring it is filed.

If you issue a document for comment or a form for completion, you must put a copy on file.

If replies or comments are received in response to your document, you must file the same.

Documents should be labelled with the appropriate file number before it is filed. This allows the paper to be reattached if for any reason it should become separated from the file.

6.15 What should be done if the record is not on paper?

Currently the majority of official HPSS records are paper records. However information defined as HPSS records may be received or created in other formats e.g. email, floppy disks, CDROMs, fax, telephone, or informal conversation.

In such cases the basic rule to adhere to is always print a "hard copy" for filing, or file a hand written record of a conversation or message, clearly signed and dated if appropriate.

7. CONTENTS OF REGISTERED FILES

7.1 What should be held in the Registered File?

The following are examples of the type of material that must be held in a Registered File:

- the origins of the HPSS organisation, staffing, functions and procedures;
- correspondence;
- principal policy papers;
- submissions to the Chief Executive/Directors;
- submissions to the DHSSPS;
- material prepared for the Assembly or an Assembly Committee (including drafts);
- bids for contracts;
- financial statements and accounts;
- details of patient/client care or treatment;
- material related to the delivery of services;
- statistical records;
- draft papers issued for comment together with comments received;
- final documents together with a record of any changes, the reason for the changes and the alternatives considered;
- notable events;
- events of contemporary interest or controversy;
- papers from bodies closely linked to the HPSS (but not subject to the Public Records Act);
- guides, manuals and instructions. Scientific, technological or medical research and development;

- projects, review and evaluation reports;
- contractual information; and
- original minutes of meetings.

However, some documents (for example, official forms or financial records) may have their own instructions for filing and disposal.

7.2 What should NOT be held in a Registered File?

The following are examples of the type of material that should not be placed in a Registered File:

- copies of personal expense claims although originals will be held on Registered Files;
- copies of minutes and papers sent for information only;
- any items with no bearing on the file subject;
- papers that have been filed in another file that are not relevant to your file subject.

7.3 How do I handle records in a Registered File?

The title of the file should be accurate and fully reflect the contents.

The lifespan of the file is limited to five years (with some exceptions, e.g. personnel files, patient/client case files) but where possible the lifespan should be restricted to calendar or financial years.

The file cover should always record the year the file was opened and if it has been closed it should record the year it was closed. The date the file is closed will determine the dates First and Second Review become due. The retention period is normally calculated from the date the file is closed. In some cases this will differ and where that is the case Appendix A will be noted.

7.4 Other good practices

The following are other good records management practices:

- once a file has been closed, no further papers may be added. If necessary continuation files for the same subject matter may be opened;
- all papers should be filed at the right hand side of the file in date order, when the file is opened the most recent paper is at the top. For some types of records e.g. patient files this will not always be possible.

- where possible, filed papers should have a hole punched for inserting a treasury tag, 2.5cm in, and 2.5cm down in the left-hand corner of the page, minimising the risk of detachment. For some file types especially patient records, personnel records, this will not always apply.
- all papers received for filing should bear the appropriate file number in which the record is to be filed;
- paper clips and pins must be removed from papers, before filing, as these will damage the paper, and when rusted can be a health hazard. Particular attention to this must be given to those records which, according to the disposal schedule, are to be preserved permanently by PRONI;
- flags, either adhesive tables or strips of paper attached to a page with sellotape, should be avoided – paper card dividers should be used;
- file covers should provide adequate protection for papers, and should be replaced if they become torn or damaged. The original cover should be tagged inside the replacement cover for reference;
- files must not contain any loose papers;
- metal tags should be replaced by plastic ended type;
- avoid duplication of papers – only one copy of papers need be filed;
- the copying of papers onto several different files must be kept to a minimum;
- any bulky items, publications etc, which need to be filed should be placed in a pocket or envelope to the left, inside the file cover; and
- floppy disks and CDs must not be stored on paper files. The disk is an unstable medium and is easily corrupted. Moreover its supporting software could be obsolete by the time the file and contents are subject to review or preservation;

7.5 How should file contents be arranged?

The “reverse book” method of filing should be used, i.e. on opening the file; the latest paper should be filed on top, and re-arranged if necessary.

Files should not start with a paper referring to another paper that is not in the file (copy from another file if necessary).

A reply should always be filed on the same file (and the same part of the file) as the paper to which it is responding.

Attachments or enclosures to documents should be filed immediately below the document to which they relate.

Plans, drawings or other bulky items should be put inside a brown envelope, and labelled with a brief description. The brown envelope should then be tagged to the file.

Papers should not normally be removed from files. In exceptional circumstances where it is necessary to permanently transfer papers between files, a cross reference should be made on the original file. Papers that are removed temporarily (eg for use at a meeting) should be returned as quickly as possible and a note of their removal should be inserted.

Duplicate copies of the same paper *should not be filed* unless any annotations made may have future relevance. The author of any annotations must state whether or not these are relevant.

8. SPECIAL CATEGORY RECORDS

In the HPSS there may be some classes of material that from time to time may need special arrangements to be made for their registration or review. Such records may be termed as 'special category records'.

Records may be treated as special category records for a variety of reasons. These include:

- the importance of the record;
- the confidentiality of the record;
- the use to which the record is put.

A record is not distinguished as a special category record simply because of its actual nature, rather it is distinguished because the HPSS has a need, for official purposes, to treat it differently from the rest of its records.

The Records Management Officer should be advised of the existence of any special category records and arrangements must be put in place to ensure that they are subject to the normal review procedure, or that a special review is agreed with PRONI.

Special category records held on paper should not be held on unregistered files. However, if it is necessary to do so for administrative reasons (and they have been retained for five years), the papers should become registered at First Review.

8.1 Photographs, Sound Recordings, Cinematograph Files, Videocassette Recordings and Machine-Readable Records

Photographs, sound recordings, cinematograph files, videocassette recordings and machine-readable records held by HPSS are public records and should be included in any Disposal Schedule. The Public Records Act (NI) 1923 is intended to preserve important information in whatever forms it is stored. Given the nature of these items, special storage arrangements might be required. Arrangements for storage, review and/or permanent preservation should be made with the Records Management Officer at the earliest possible opportunity, preferably before creation.

Further guidance about audiovisual records may be obtained from the National Archives (London) website:

(<http://www.pro.gov.uk/recordsmanagement/standards/audiovisual.htm>).

8.2 Papers of Temporary Commissions, Committees and Review Bodies (Including Non-Departmental Public Bodies)

Papers of temporary commissions, committees and review bodies (including those relating to non-departmental public bodies) are always exempt from normal review periods. They should be dealt with immediately after the body has finished its work. It is not necessary to wait until the papers reach the normal age for review. Indeed, normal review could be impossible in the future given that staff within the body are likely to be stood down when it has finished its work.

The Secretary of the body should inform both the Records Management Officer, the DHSSPS Departmental Records Officer (DRO) and PRONI when the body is thought to be drawing to a close. Arrangements can then be made for the proper retention and disposal of records. Retained records will be transferred to PRONI from the Department that provided the Secretary.

8.3 Statute-Barred Records

The Rehabilitation of Offenders (NI) Order 1978 precludes the release of information about 'a living identifiable individual' who has been charged with or convicted of an offence resulting in a fine or in a sentence of imprisonment or corrective training for a term of up to 30 months. Depending on the age of the person at the time and the term of sentence, a person is considered to have been rehabilitated after a specified number of years and thereafter no details of 'spent convictions' may be made public. In accordance with a guideline set down by the Northern Ireland Office such material remains closed until the person would be deemed to have reached the age of at least 95 years.

8.4 Departmental Inquiries – Under Legislation

Article 54 of the Health and Personal Social Services (Northern Ireland) Order 1972 (the 1972 Order) provides as follows:

"The Department may cause an Inquiry to be held in any case where it appears to the Department advisable to do so in connection with any matter arising under this Order, the HPSS (Special Agencies) (NI) Order 1990, the 1991 Order (which created the HPSS Trust structure) or the 1994 Order (which enables Trusts to perform certain of the Boards' functions and deals with auditing.)"

Schedule 8 to the 1972 order has effect in relation to such Inquiries and sets out various provisions, e.g. the Department's power to appoint the person to hold it, power to administer oaths and require the production of documents and, of course, to make a report.

The papers, of such Inquiries should be dealt with immediately the Inquiry is completed. It is not necessary to wait until the papers reach the normal age for review. The secretary to the Inquiry should inform both the Records

Management Officer, the DRO in the DHSSPS and PRONI when the Inquiry is thought to be drawing to a close. Arrangements can then be made for the proper retention and disposal of records. Retained records will be transferred to PRONI from the secretary.

8.5 Departmental Inquiries – Administrative

An Internal Departmental Inquiry may be initiated by a Minister or Permanent Secretary, with no statutory basis. The records should be reviewed once the Inquiry is complete. The final action will be determined by PRONI on Review.

8.6 Highlighting of Statute-Barred Records

Individual files or records in a statute-barred class should be clearly identified in consultation with the Departmental Records Officer.

8.7 Further Guidance

Further information on special category records may be obtained on the PRONI website (www.proni.gov.uk).

9. DISPOSAL SCHEDULES

9.1 What does “disposal” mean in Records Management terms?

“Disposal” of records can mean:

- File review;
- File for permanent preservation; or
- File destruction.

9.2 What is a Disposal Schedule?

A disposal schedule is the key document in a records management system which outlines:

- the types of records held within a Branch/Organisation;
- the minimum period for which such records should be retained;
- the action required when the minimum retention period has been reached.

The final action column of the Schedule determines the eventual fate of the records through permanent preservation (archive) or destruction.

The disposal schedule in Appendix A lists all the public records for which pre-determined periods of retention have been agreed between the Departmental Records Officer and PRONI. All organisations within the HPSS will be required to develop their own disposal schedule using the generic one in Appendix A as a base.

9.4 There are 4 options for final action:

Review	These are records requiring appraisal. They are appraised by HPSS staff to determine if there is a continuing business need and by PRONI staff to determine if they are required for historical or research purposes.
Retain Permanently	There are few records which fall into this category but they are records which the HPSS need to retain permanently for business administrative need e.g. the records relating to a permanent benefaction of which an annual interest is claimed.

Permanent Preservation	There are files/records which PRONI have decided are of long-term historical research value. These records must be transferred to PRONI.
Destroy	These are records PRONI consider to be low grade, proving no continuing business/legal value and are of no historical or research value to PRONI.

9.5 What is PRONI Interested In?

- unpublished administrative histories – development of organisational structure – useful road map for researchers;
- policy files – decision making process;
- business plans – enactment of policy through targets etc;
- inspection reports – delivery of services on the ground;
- annual reports – targets met, events, etc;
- precedent files – departures from the normal.

Some Practical Examples

- HSS Board, Trust or Agency – Board minutes;
- Annual Accounts;
- Adoption Panel Records;
- Children's Homes Inspection Records;
- Patient/Client records of Precedent Cases.

This is only a snapshot of their interest but PRONI have the final decision on preservation. Further information can be found in Appendix A. PRONI will not make records available to the public until consultation has taken place on whether they can be opened.

9.6 What records need to be considered for permanent preservation?

Certain groups of files and papers can be readily defined as worthy of selection for permanent preservation. PRONI have already advised which of the records listed in Appendix A they want to permanently preserve. Some records have been selected for review to give both the HPSS and PRONI the chance to determine their usefulness.

9.7 What happens if records should be permanently preserved?

Records Management Officers should develop internal procedures to ensure all records listed for permanent preservation are transferred to PRONI. (See Section 11).

9.8 Why is a Disposal Schedule needed?

- For the prompt disposal of records whose retention period has ended;
- For the storage of records which must be temporarily retained after they are no longer needed in current business;
- For the preservation of records which are of long-term value;
- To meet legislative requirements
 - o The Public Records Act (Northern Ireland) 1923
 - o The Disposal of Documents Order (SR &O 1925 No 167)
 - o Freedom of Information Act 2000;
- To provide the HPSS with the legal basis for destroying records. If a request for information under Freedom of Information is received and the records are no longer available, then the HPSS can prove they were destroyed in line with current policy, i.e. the Disposal Schedule; and
- The Lord Chancellor's Code of Practice on the Management of Records under Section 46 of the Freedom of Information Act 2000 confirms the necessity for Disposal Schedules. The Disposal of Documents (Northern Ireland) Order 1925 provides the HPSS with the legal basis for destroying records.

9.9 How is a Disposal Schedule produced?

The Northern Ireland Records Management Standard on Disposal Scheduling gives basic guidelines on the creation of Disposal Schedules. A generic disposal schedule, (see Appendix A) has been prepared and agreed in consultation with PRONI. All HPSS organisations should use the disposal schedule in Appendix A as the basis for their own Disposal Schedules.

All Disposal Schedules should be agreed with PRONI. Further guidance on the development and requirements of a disposal schedule are available in NIRMS. www.proni.gov.uk/NIRMS/GUIDELINES.pdf

9.10 How are records classified?

A work area is a method of classifying records into a distinguishable group. All HPSS records should be classified using this method and Appendix A endeavours to list all the work areas necessary in order for files to be properly classified. This document will need refined and where amendments to the work areas become known they should be notified to the DHSSPS Departmental Records Officer through the organisation's Records Management Officer.

An explanation is needed on all local disposal schedules as to what should be filed in each work area.

Work areas may need to be further sub-divided and if so a full description of each work area and sub division should be given.

9.11 Should all work areas be similar?

There are generic work areas across the HPSS although there will be also specific work areas relating to the branch concerned.

9.12 Is there a standard format for all schedules?

The Disposal Schedule in Appendix A should be used as the standard format, in addition to the requirements in NIRMS. Schedules should have a life span normally of 2 years. The draft schedule should be quality assured by nominated staff within the organisation, the Departmental Records Officer in the DHSSPS and the Public Record Office of Northern Ireland.

9.13 Signatures required on Disposal Schedules

The following group of people must officially sign all disposal schedules and in this order:

Head of Records Management PRONI
Chief Executive PRONI
Permanent Secretary DCAL
Permanent Secretary DHSSPS
Chief Executive of HPSS Organisation
Lead Senior Manager for Records Management
Records Management Officer

9.14 How should the Disposal Schedule be printed?

The cover sheet should be printed on the appropriate headed paper and can be printed locally. Three copies should be printed and referred for signing. When the signing process is complete, the last officer to sign (i.e. the lead Records Management Officer within the organisation) should send one of the signed copies to PRONI, one to the DHSSPS Departmental Records Officer and keep one themselves, this should be photocopied locally and cascaded to staff.

9.15 What happens after the Disposal Schedule is put in place?

Chief Executive	Records Management will be assessed against the appropriate Controls Assurance Standard. Chief Executives are personally accountable for the quality of records management within their organisation, from creation to disposal.
Lead Senior Manager	Co-ordinates the implementation of the Records Management Strategy ensuring systems are in place for the appropriate operation of the disposal schedule.
Records Management Officer	Oversees the work of the Local Records Managers, meeting regularly to monitor effective operation of the schedule.
Local Records Managers	Manages the day-to-day operation of Records Management practices and policies as well as developing and maintaining the Disposal Schedule.

Copies of the Disposal Schedule should be made available to staff and be used in staff training.

9.16 Operation of the Disposal Schedule

The operation of the disposal schedule will only be successful if staff are aware of their records management responsibilities. Disposal schedules should be amended in the light of changes and responsibilities that affect the work areas. Any changes must be agreed with PRONI and the DHSSPS.

9.17 Are there any Important Records Management points to remember?

- Files should be closed as soon as possible;
- The material in the file should accurately reflect its title/purpose;
- Time bound the file to either a financial or calendar year (See 6.8.1);
- The disposal schedule dictates when files should be closed, as well as whether or not they should be destroyed;
- File covers should be completed in accordance with the disposal schedule;
- Destruction dates should be entered where possible or cover noted for normal review;
- Procedures should be put in place to make sure files are destroyed or transferred to PRONI at the correct time;
- The HPSS is only concerned with keeping records for administrative need and the effective delivery of treatment and care. The minimum retention periods have been developed to reflect this; and
- PRONI have the legislative authority to decide on the "Final Action" of any record.

10. REVIEW

10.1 Reviewing Registered Files

The Disposal Schedule in Appendix A outlines all records created by the HPSS and the periods agreed for their disposal. Records not selected for destruction, permanent preservation or transfer to PRONI will be subject to the review process.

Senior Management should ensure that procedures are in place within their organisation to review files at the appropriate time.

10.2 What is the purpose of reviewing Registered Files?

HPSS records are examined or reviewed in order to determine if they are worthy of destruction, retention, or permanent preservation. This is because their full value cannot be determined at an earlier stage.

10.3 How long should records be kept?

Records should be kept for as long as they are needed to meet the operational needs of the HPSS, and legal and regulatory requirements.

Each record needs to be assessed individually to:

- determine its value as a source of information about the HPSS, its operations, relationships and environment;
- assess its importance as evidence of business activities and divisions; and
- establish whether there are any legal or regulatory retention requirements.

The Disposal Schedule in Appendix A has already examined the value and considered the legal obligations, agreed retention periods with PRONI and taken advice from the Departmental Solicitor's Office. Where there are records which have been omitted from Appendix A the action above should be taken and the DRO and PRONI consulted. The Disposal Schedule in Appendix A defines which HPSS records must be reviewed.

10.4 Who is responsible for reviewing?

The Records Management Officer within the organisation should decide the most appropriate person(s) to carry out file review(s) in line with the agreed Disposal Schedule. This should be a Senior Manager with an understanding of the subject area.

If an officer of the appropriate grade is not available in the branch, the next appropriate highest-ranking officer with an understanding of the subject area should be selected to complete the review.

10.5 What must I do to review a file?

- Understand the business process and the importance of the records to that process;
- Identify evidence for what was done, why, when, where and by whom, and forms the basis for public and internal accountability;
- Understand the legal or regulatory retention requirements that must be complied with and what records need to be retained in order to do so.

10.6 What should the reviewing officer consider in assessing the value of records?

Reviewing officers should consider only the administrative value of the records and should ask these useful questions to arrive at their decision:

- Is there a continuing need to retain this record for the conduct of day-to-day business?
- Is there clear evidence of a future need for constant reference to this record?
- Will it be needed to deal with enquiries in the future?
- How many enquiries are likely?
- Is the information needed for statistical analysis within the organisation?
- Are there bodies of statistical information upon which future policies and forecasts may be based?
- Is the information required for conducting legal proceedings in the event of a legal action being taken by, or against the organisation?
- Is there a legal requirement to retain these records (e.g. Health and Safety regulations)?
- Is there a financial need to retain these records (e.g. for audit purposes)?
- Is there a professional reason (e.g. continuity of care, research, audit)?

- Is the information significant because it provides precedents or is required for authorisation purposes?
- Is the information otherwise available whether within the HPSS, or in published form?

10.7 Why do I need to take account of the Disposal Schedule?

The disposal schedule provides the legal basis for organisations to dispose of records.

10.8 How are the records categorised for disposal?

Disposal schedules define the minimum length of time specific types of records have to be retained before being reviewed, destroyed or transferred to PRONI. Records fall into four main categories of action:

- Records to be destroyed after an agreed period, e.g. a file containing receipts for registered and recorded delivery mail is retained for 2 years following the financial year to which they relate and then destroyed;
- Records selected for permanent preservation by PRONI;
- Records to be reviewed; and
- Records which are required to be kept permanently in the organisation i.e. benefactions, where the benefactory endowment trust fund/capital remains permanent.

Files with specified destruction dates included in the Disposal Schedule should be destroyed according to the agreed instructions.

10.9 How do I know what records need to be permanently preserved?

Certain groups of files and papers can be readily defined as worthy of selection for permanent preservation. PRONI have and will continue to advise which records fall into this category. The Records Management Officer should ensure that the necessary records are maintained.

10.10 How will I know when records are due to be reviewed?

Procedures should be put in place locally to ensure that records are reviewed at the appropriate time. Chief Executives and Senior Management are personally accountable for all aspects of Records Management within their organisation.

10.11 When do records become due for review?

A file may be reviewed a number of times:

On Closure	A file should be reviewed immediately it is closed. The long term value may be quite clear at this stage and staff are asked to indicate their decision on the file's disposal when it is being closed, if not already specified in the branch Disposal Schedule.
First Review	Review five years after the file was closed. Procedures need to be put in place to ensure that these records are reviewed at the appropriate stage.
Second Review	There may be occasions when it proves impossible to reach a decision on a file at first review. Such files may be put away for examination at a later stage, usually 25 years after the file was opened. If this is the case systems need to be in place to ensure that the second review takes place.

10.12 What are the choices at First Review?

The following options are available:

Immediate destruction	Where the file has no further administrative value the Records Management Officer will arrange for PRONI to examine and authorise destruction if there is no need to preserve.
Request to retain for 5/10 years	If there is short to medium term administrative need. The file will be retained as instructed and should then be destroyed by the Records Management Officer, after PRONI inspection and without further referral to the branch.
Retain for 15 years	Where the file is required for long-term administrative reasons. The file is retained until second review becomes due. The file is inspected by PRONI before branches are given an opportunity to review.

10.13 When will the Second Review of files take place?

The "second review" should take place 20 years from the date of the last paper on the file and not more than 25 years from the date the file was opened.

10.14 Why do files need to be reviewed a second time?

The second review exercise gives PRONI the opportunity to decide if files already retained for 15 years for administrative reasons are suitable for permanent preservation. If the file is not selected by PRONI as having any long-term preservation value, the file is passed to the reviewing officer to decide if the file can be destroyed.

10.15 What are the choices at Second Review?

You must decide how long to retain records that are not considered worthy of preservation by PRONI and where possible consider destruction. If however an administrative need to keep them is established, then the reviewing officer must document the reasons why. The options available to the reviewing officer are:

To destroy Immediately	If the file has no further administrative value. The file should be returned to the Records Management Officer to arrange destruction.
To retain	If the file is still required on account of administrative need. The reviewing officer must document reasons for specified retention. The file will eventually be extracted by the Records Management Officer and destroyed upon expiry of the retention date, without further referral to the branch.

10.16 Special Review by PRONI

In exceptional circumstances a "Special Review" may be carried out by PRONI. This means that the documents will be made available to PRONI, without prior investigation by the functionally responsible body, in order to assess their value as historical documents. Where the disposal schedule dictates a special review, the Records Management and Administrative section of PRONI should be contacted to determine and agree the practical arrangements for the special review.

11. TRANSFER/DESTRUCTION OF FILES

11.1 Transferring Files to PRONI

The Public Record Office of Northern Ireland have identified in the Disposal Schedule in Appendix A records which they want to permanently preserve.

There are other records which are to be reviewed and some of these may be selected for permanent preservation as well.

11.2 Process of Transfer

The Records Management Officer should contact PRONI when files are ready to be transferred (see Appendix B for contact details).

The information required at this stage is: your name, organisation, location, contact number and a brief description of the records for transfer (e.g. 20 files containing precedent cases, agendas of Trust meetings).

PRONI will then forward a schedule to you for completion. The schedule will be **your** organisation's record of the transferred files and should be completed in detail (the reference number, file title, covering dates, and the terms of access to the file).

A decision on the terms of access for each file needs to be made prior to transfer and this should be recorded on form PR14 to accompany every file. Any queries about access should be referred in the first instance to the Access Section, PRONI.

You should then get in touch with PRONI to agree a convenient time and date to transfer the records.

PRONI will prepare a warrant when the completed schedule and access terms have been agreed.

You and your contact in PRONI should check off the files against the schedule when the files are being transferred.

Both parties should sign the schedule and each retain a copy.

11.3 Destroying Files

Care must be taken when destroying HPSS records.

The basic procedures for destruction are:

Non-sensitive files/records

- > **Information in public domain:**
 - rubbish bin;
- > **Files/records not normally available to the public:**
 - torn into small pieces;
 - bagged for collection by approved disposal firm.

Sensitive records

- > **Restricted: Strip – shredded**
 - bagged for collection by approved disposal firm.
- > **Confidential: Cross-cut shredded**
 - bagged for pulping or burning by approved disposal firm.
- > **Secret and Top Secret: Cross-cut shredded**
 - bagged for burning by approved disposal firm.

11.4 Optical/Magnetic Media

Optical and magnetic media require special disposal facilities. The HPSS ICT Security Policy should be consulted and followed in relation to the disposal of such media.

12. RECORDS MANAGEMENT – VISION OF THE FUTURE

Records management is ongoing work that is the responsibility of all staff in the HPSS and is a fundamental part of their normal duties. It is important to operate in an environment of effective records management, which contributes to an improved quality in the services provided by an organisation. Each HPSS organisation will be expected to self-assess against, and report compliance with, a Records Management Controls Assurance Standard from 2005/06.

12.1 Disposal Schedules

The HPSS should prepare disposal schedules based on the schedule in Appendix A in the run up to the full implementation of the Freedom of Information Act.

12.2 Impact of the Digital Age

The information revolution has radically changed the way that the HPSS works. The benefits of electronic information systems, such as improved retrieval of information, quicker and cheaper communication and the ability to re-use information, have changed the nature of both work and record keeping within the HPSS.

The way in which information of the organisation was stored has changed with the increased penetration of technology and complexity of computer systems.

Electronic data may take the form of email, database systems, websites and other information systems. As data is created in these various ways, it provides useful evidence (a record) of the HPSS's past activities. For legal, administrative, financial and accountability reasons, these records are valuable to the HPSS.

Current practice and guidance is that material held in digital form should be produced in hard copy and filed in Registered Files. However this would not apply to well managed electronic systems such as PAS.

Current international best practice for managing digital data as records is for each organisation to ensure that all electronic business systems have appropriate record keeping functionality for maintaining the integrity of electronic data as digital records over time. It will be the case that digital records should not be disposed of except under an appropriate Disposal Schedule.

12.3 File Plans

A file plan provides a structure for filing and retrieving records, generally using a controlled vocabulary. It may also be described as a classification scheme for arranging records based on the functions and activities of the organisation. Such a scheme or file plan facilitates the creation and retrieval of electronic records, particularly where large amounts of data are involved. The disposal schedule in Appendix A will be revised to take account of the file Plan being created for the HPSS.

The e-Government Metadata Standard (e-GMS) is produced by the Office of the e-Envoy and is needed to ensure maximum consistency of metadata across public sector organisations.

The file plans and metadata will be vital to the successful implementation of any Electronic Document and Record Management System (EDRMS) in the HPSS.

12.4 Electronic Document and Record Management Systems (EDRMS)

An electronic document becomes (part of) an electronic record when it takes part in a business transaction, and is kept as a record of the transaction. EDRMS will provide a corporate filing structure, classification of documents within the filing structure and retention and disposal based on the disposal schedules. Disposal or transfer of electronic records will become an issue under such a system

APPENDIX A

HPSS Records Management - Disposal Schedule

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1. INTRODUCTION

Good management of records is central to the effective and efficient delivery of care and services in the HPSS. The destruction of records is an irreversible act, while the continual cost of preserving records worthy of permanent preservation is high. This Disposal Schedule gives guidance on how long records should be kept for business/administrative purposes, and on the identification of records of permanent value.

The records created by HPSS bodies are Public Records as defined in the Public Records Act (Northern Ireland) 1923. In essence the records do not belong to the creator but are subject to all aspects of the aforementioned legislation. HPSS bodies, through their Records Managers must therefore ensure that their records are managed in accordance with the attached Disposal Schedule.

This Schedule identifies the **minimum** retention periods based on legal and other requirements. Whenever this Schedule is used the following criteria should be addressed:

- i. Local business requirements/instructions must be considered before activating retention periods in this Schedule.
- ii. Decisions should also be considered in the light of the need to preserve records, whose use cannot be anticipated fully at the present time, but which may be of value to future generations. The function of reviewing files ensures that consideration is given to the importance of such records.
- iii. The provisions of the Data Protection Act 1998 must also be complied with.

2. PERMANENT PRESERVATION

2.1 PRONI want to preserve papers which will provide information on the HPSS for future generations. They are interested in the development of organisational structure which is a useful road map for researchers. The following list provides guidance on some of the issues for which they want to preserve records. This list is by no means exhaustive.

- Policy material relating to the closing, merging or opening of hospitals and specialist clinics;
- Material relating to appointments to public bodies, i.e. chairpersons and board members of hospitals, HSS Boards, Trusts and Agencies and Departmental Advisory Committees;
- Minutes and policy papers (consultation) [but not general papers] of public bodies, Central Nursing Advisory Committee, Central Dental Advisory Committee, Advisory Committee of Allied Health Professionals, Central Medical Advisory Committee, Central Personal Social Services Advisory Committee, Central Pharmaceutical Advisory Committee, Post-Graduate Pharmaceutical Education and Training Committee etc;
- Papers relating to the granting of Trust status to individual hospitals and to the roll-out of HSS Trusts or similar bodies, e.g. special agencies;
- Papers relating to the organisation of Health and Social Services at the local level, e.g. the creation of the Area Health and Social Services Boards in 1973;
- Papers relating to the contracting-out of core Health and Social Services that were formerly undertaken by the public sector, e.g. private clinics;
- Strategic, operational and business plans, annual reports and statements of accounts of HPSS/DHSSPS, Area Health and Social Services Boards, Trusts, Agencies and related Public Bodies;
- Papers of Steering Committees – these are important evidence for showing how policy is created;
- Papers of relevant Working Parties. Care needs to be taken to ensure that these relate solely to health and social services issues – do not keep papers relating to extraneous matters, e.g. catering facilities or information technology;

- * Topical material, i.e. fluoridation of water, joyriding, protection of children and vulnerable adults, fertility drugs, research into genetic engineering, organ transplants, problems with waiting lists, use of asbestos, etc.;
- * Material that records how 'The Troubles' have impacted on the HPSS, e.g. bomb blasts, artificial limbs, hunger strikes, intimidation, provision of services, responses to emergencies etc;
- * Material that relates to new or amended HPSS legislation, Orders, etc. Again care needs to be taken to ensure that these are not simply copies of GB legislation with the title 'GB' substituted by 'Northern Ireland';
- * Policy and evidential papers relating to the care of disabled people, elderly and children (particularly those that relate to care in the community vis-à-vis institutional care);
- * Material relating to health scares and epidemics, e.g. BSE, AIDS, SARS radiation from Chernobyl, Foot and Mouth, etc. Care must be taken to ensure that these apply on a local level and are not simply copies of material emanating from Whitehall;
- * Papers relating to the bringing of hospitals into the Health Service i.e. the integration of the Mater Hospital, Belfast into the Health Service in 1972;
- * Papers relating to criminal negligence or malpractice in the HPSS;
- * Papers relating to health promotion issues, e.g. tobacco smoking, alcohol and drug abuse, solvent abuse, family planning, etc;
- * Papers relating to Mental Health/Learning Disability, e.g. records of Mental Health Commission, research into suicide, fostering of mental health patients/clients;
- * Papers relating to emergency planning;
- * Papers relating to the administration of funding, e.g. GP Fundholding;
- * Records of Public Inquiries;
- * Papers relating to joint Cross-Border initiatives; and
- * High-level papers relating to vivisection.

- 2.2.** Responsible Records Managers need to consider whether exceptional circumstances (e.g. events of local or national significance reflected in the records) require records to be kept for longer periods for specific purposes. In such cases the Records Management and Administration Section of the Public Record Office of Northern Ireland should be informed. PRONI will have the ultimate decision as to whether or not records will be permanently preserved.

3. THE DISPOSAL SCHEDULE

This Schedule covers all records regardless of the medium in which they are held (e.g. paper, microfilm, electronic).

Records selected for permanent preservation should be transferred to PRONI following the procedures in this guidance.

The recommended periods reflect long-standing good practice, and established thinking about the usefulness of the records for business purposes and periods during which the records support necessary accountability. In the case of some records, statutory requirements apply. Where this is known to be the case, the relevant legislation is mentioned in the Schedule.

This Schedule has 6 columns.

- | | | |
|----|-----------------------------|---|
| 1. | Work Area | The main area of work or main area of classification under which each record falls. |
| 2. | Reference | This is purely to facilitate the use of, and reference to, this document. |
| 3. | Record Type | This column identifies the type of records generated within each work area. |
| 4. | Minimum Retention Period | The retention period is normally calculated from the date the file is closed (guidance on when a file should be closed is given in para 6.12). In some cases this does differ and, if so, the reasons are explained. The minimum retention period is the length of time the HPSS requires the record for administrative need. |
| 5. | Relevant Legislation/Source | Records are sometimes kept for a specific time period because of statutory requirements. This column sites the appropriate legislation governing the types of records. |

6. Final Action

There are five possibilities:

- Destroy – The files should be automatically destroyed by the organisation.
- PRONI Permanent Preservation.

The Public Records Act (Northern Ireland) 1923 gives authority for the Public Record Office of Northern Ireland to preserve those records it considers worthy of preservation. They aim to select and preserve those records, which provide a legal or historical record of the past, and to make these available to the public for consultation and research.

PRONI have in some cases decided in advance to preserve certain types of records. At the point when the retention period has expired such files should be transferred to PRONI.

- Retain Permanently.

These records should be retained permanently in the HPSS. There will be very few records in this category.

- Determined on Review.

In some cases the files have been selected for review. This is either because PRONI want to consider their value at the review stage or because their administrative use is not certain at present. Review procedures are given in this guidance.

- Special Review by PRONI

These records should be made available to PRONI, without prior investigation by the functionally responsible body so that PRONI can assess their historical value (see para 10.16).

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Accident/ Incidents/ Untoward Events	A1	Record sheets/book, Forms, Reports	10 years from the occurrence or last entry or until the 21st birthday whichever is the later		Destroy
	A2	Record sheets (where litigation has commenced)	Normal review. 10 years from the date proceedings have been completed or at the 21st birthday whichever is the later, subject to legal advice. (see guidance)		Determined on review
	A3	(RIDDOR) register	10 years from the occurrence or until the 21st birthday whichever is the later.	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations Northern Ireland 1997	Destroy
Complaints	B1	Correspondence, investigation and outcomes	10 years from completion of the action		When the 10 year retention period has expired 10% of files should be selected at random and transferred to PRONI. Example 1993 generates 10 complaints files, 10% of these files (i.e. 1 file) is sent to PRONI and the remainder destroyed. Destroy
	B2	Returns made to the Department	Files are closed annually and kept for 6 years following closure		

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/ Source	Final Action
Contracts/ Service Level Agreement	C1	Approval files	15 years	Consumer Protection (Northern Ireland) Order 1987 The Limitation (Northern Ireland) Order 1989 The Limitation (Northern Ireland) Order 1989	Determined on review Destroy
	C2	Approved suppliers lists	11 years		
	C3	Contracts – non sealed (property) on termination	6 years from date of practical completion		Destroy
	C4	Contracts – non sealed (other) on termination	6 years		Destroy
	C5	Contracts (including capital works contracts) – sealed	Contracts under seal and associated records should be kept for a minimum of 15 years. When they reach 15 years old they should be reviewed and PRONI invited to examine them. 6 years		Determined on review
Equipment	C6	Contractual arrangements with hospitals or other bodies outside the Health Service including papers relating to financial settlements made under the contract	6 years		Destroy
	C7	Tenders (successful)	15 years		Destroy
	C8	Tenders (unsuccessful)	6 years		Destroy
	D1	Forms – Surgical Appliances – AP1, 2, 3 and 4	2 years from completion of audit		Destroy
	D2	Inventories (not in current use) of items having a life of less than 5 years	1.5 years or if in book form 1.5 years after the last entry		Destroy
	D3	Inventories of plant and permanent or fixed equipment	Permanent		Retain permanently within organisation
	D4	Inventories of furniture, medical and surgical equipment not held on store charge having a minimum life of 5 years	Permanent		Retain permanently within organisation
	D5	Products – liability	11 years	Consumer Protection (Northern Ireland) Order 1987	Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation /Source	Final Action
Estates	E1	Buildings and engineering works, inclusive of major projects abandoned or deferred -key records, (e.g. final accounts, surveys, site plans, bills of quantities).	Retain permanently		Retain permanently within organisation
	E2	Buildings and engineering works, inclusive of major projects abandoned or deferred - town and country planning matters and all formal contract documents (e.g. executed agreements, conditions of contract, specifications, "as built" record drawings and documents on the appointment and conditions of engagement of private buildings and engineering consultants.	Retain permanently		Retain permanently within organisation
	E3	Buildings - papers relating to occupation (but not Health and Safety information) of the building.	Review 3 years after occupation ceases	Construction (Design Management) Regulations (Northern Ireland) 1995	Determined on review
	E4	Deeds of Title/Title Deeds	Permanent		Retain permanently within organisation
	E5	Drawings/CAD Drawings	Lifetime of building		The Public Record Office of Northern Ireland should be invited to sample these records. If they decide not to preserve them the records should be destroyed.
	E6	Engineering Works	Permanent		Retain permanently within organisation
	E7	Fire training records	5 years		Destroy
	E8	Fire Officers Register	5 years		Destroy
	E9	Fire Inspections	5 years		Destroy
	E10	Health and Safety Information	Until cancelled or superseded		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Estates	E11	Inspection/Insurance reports – e.g. boilers, lifts etc.	Lifetime of an installation. Normally retain for the lifetime of an installation. However, it is necessary to assess whether obligations incurred during the lifetime may not be invoked until afterwards, in which case a judgement must be made. If there is any measurable risk of a liability in respect of installation beyond their operational lives, records of this kind should be retained indefinitely. 20 years 3 years after expiry	Consumer Protection (Northern Ireland) Order 1987	Destroy
	E12	Land surveys/registers			Destroy
	E13	Leases, the grant of leases, easements, licences and other rights over property.			Destroy
	E14	Maintenance contracts – routine	6 years		Destroy
	E15	Maintenance requisition books/job dockets	6 years after last entry in the book		Destroy
	E16	Medical device/equipment alerts	Until reviewed or withdrawn by NIAIC		Destroy
	E17	Manuals operating/maintenance	Lifetime of equipment		Destroy
	E18	Maps	Retain permanently		The Public Record Office of NI should be invited to sample these records. If they decide not to preserve them the records should be destroyed.
	E19	Plans – Building (as built)	Lifetime of Building		The Public Record Office of NI should be invited to sample these records. If they decide not to preserve them the records should be destroyed.
	E20	Plans – Building (detailed)	Lifetime of Building		The Public Record Office of NI should be invited to sample these records. If they decide not to preserve them the records should be destroyed.

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Estates	E21	Plans - Engineering	Lifetime of Building		Destroy
	E22	Property Acquisitions Dossiers	Permanent		Retain permanently
	E23	Property Disposal Dossiers	Permanent		Retain permanently
	E24	Site files	Lifetime of site		Destroy
	E25	Structure Plans	Lifetime of Building - then review		Determined on review
Finance	E26	Surveys - building and engineering works	Lifetime of Building		Destroy
	F1	Annual Accounts (final one set only)	Permanent	Prepared in pursuance of the Health and Personal Social Services (Northern Ireland) Order 1972.	A copy of the final published accounts should be sent to The Public Record Office of Northern Ireland - Background papers retained permanently
	F2	Audit records - original documents	2 years from completion of audit		Destroy
	F3	Audit reports (including management letters, and system/ final accounts memorandum).	2 years after formal clearance by Statutory Auditor		Destroy
	F4	Cost Accounts	3 years		Destroy
	F5	Accounts - Minor Records	2 years (from completion of the audit)		Destroy
		a. Pass-books, bank statements of accounts, pay-in slips, lodgement slips counterfoils, cancelled and discharged cheques, accounts of petty cash expenditure, travelling and subsistence accounts, minor vouchers including duplicate receipt books, income records, receipt for registered and recorded delivery mail, forms used in connection with the supply of surgical appliances, laundry lists and receipts			
		b. Working Papers	3 years (from completion of the audit)		Destroy
		c. Debtors records - cleared	2 years (from completion of the audit)		Destroy
		d. Debtors records uncleared	6 years (from completion of the audit)	The Limitation (Northern Ireland) Order 1989	Destroy
	F6	Advice notes (Delivery statement, or note advising what is in a package, or what is coming; They are usually received in advance of the invoice.)	2 years		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Finance	F7	Benefactions/Endowments/Trust Fund – Documents relating to benefactions, special donations and memorials of any sort covered by Health Service Legislation.	5 years after the end of the financial year in which the Trust monies become finally spent or the gift in kind was accepted.		Destroy
			Cases where the Benefaction or Endowment Trust fund/capital/ interest, remains permanent, the records should be permanently retained by the organisation.		Retain – permanently
	F8	Bills, receipts and cleared cheques	6 years		Destroy
	F9	Budgets	2 years from completion of audit		Destroy
	F10	Buying orders for Goods and Services	6 years		Destroy
	F11	Capital Charges Data	2 years from completion of the audit		Destroy
	F12	Capital Paid Invoices	6 years following the end of the financial year to which they relate	The Limitation (Northern Ireland) Order 1989	Destroy
	F13	Cash Books	6 years following the end of the financial year to which they relate	The Limitation (Northern Ireland) Order 1989	Destroy
	F14	Cash Sheets	6 years following the end of the financial year to which they relate	The Limitation (Northern Ireland) Order 1989	Destroy
	F15	Creditor payments	3 years following the end of the financial year to which they relate		Destroy
	F16	Delivery notes	2 years following the end of the financial year to which they relate		Destroy
	F17	Demand notes	6 years following the end of the financial year to which they relate		Destroy
	F18	Estimates including supporting calculations and statistics	3 years following the end of the financial year to which they relate		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Finance	F19	Expense claims including travel and subsistence claims - claims and authorisation	6 years following the end of the financial year to which they relate		Destroy
	F20	Excess Fares	7 years after payment ceases.		Destroy
	F21	Funding data	6 years following the end of the financial year to which they relate		Destroy
	F22	Income and expenditure journals	6 years following the end of the financial year to which they relate		Destroy
	F23	Invoices	6 years following the end of the financial year to which they relate	The Limitation (Northern Ireland) Order 1989	Destroy
	F24	Ledger Records: including such documents as cash book, ledgers, income and expenditure journals, nominal rolls, non-Exchequer funds records (patient monies).	6 years following the end of the last financial year to which they relate.		Destroy
	F25	Mortgage documents (acquisition, transfer and disposal)	Permanent		PRONI
	F26	Receipt for registered and recorded delivery mail	2 years following the end of the financial year to which they relate		Destroy
	F27	Receipts	2 years following the end of the financial year to which they relate	The Limitation (Northern Ireland) Order 1989	Destroy
	F28	Requisitions	2 years		Destroy
	F29	VAT records	6 years following the end of the financial year to which they relate		Destroy
	F30	Value for money (VFM) reports. Created or instigated internally in the organisation.	Normal Review (i.e. 10 years)		Determined on review

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Health, Acute and Community	G1	Children and young people.	Until the patient's 25th birthday or 26th if young person was 17 at conclusion of treatment or 8 years after last entry, if longer, or 8 years after death if death occurred before 18th birthday. (If the record relates to a Looked After Child (LAC) then it must be retained until at least 75 years from date of birth or if the child dies before age 18 in care then for a period of 15 years from date of death.)	Children's Homes Fostering Regulations (Northern Ireland) 1969 Reg 15 (Re LAC)	Destroy (with the exception of Precedent Cases) Precedent Cases should be identified as early as possible and transferred to PRONI.
	G2	Transplant records - Patient who has received an organ transplant	11 years beginning on the date of the patient's death or discharge whichever is the earlier. Precedent Cases should be transferred to PRONI.		Destroy (with the exception of Precedent Cases). Precedent Cases should be identified as early as possible and transferred to PRONI.
	G3	Family Planning	8 years after closure of the case		Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI.

Health, Acute and Community: These records are patient focussed increasingly a multi-disciplinary in nature, however they could be created by any Health Care Professional e.g. Nursing, Medicine, or Allied Health Professional in community or acute settings.

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Health Acute and Community	G4	Dental, ophthalmic and auditory screening records Children	Until the patient's 25th birthday or 26th if young person was 17 at conclusion of treatment or 8 years after last entry, if longer, or 8 years after death if death occurred before 18th birthday. (If the record relates to a Looked After Child (LAC) then it must be retained until at least 75 years from date of birth or if the child dies before age 18 in care then for a period of 15 years from date of death.)		Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI
		Adults	20 years after no further treatment/screening considered necessary; or 8 years after the patient's death if patient died while still receiving treatment. Review after 30 years 8 years after conclusion of treatment		Determined on review Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI
	G5 G6	Epidemiological surveys Patient/Client Clinical/Medical Case Records (not covered in other categories)			Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI
	G7	Maternity (all obstetric and midwifery records including those of episodes of maternity care that end in still birth or where the child later dies)	25 years after last entry or update.		Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Health Acute & Community	G8	Mentally disordered persons (within the meaning of the Mental Health (Northern Ireland) Order 1986)	20 years after no further treatment considered necessary; or 8 years after the patient's death if the patient died while still receiving treatment		Transfer to PRONI all files for each Census Year (see Glossary) beginning with 1951 and in addition all files related to: a) suicide cases or where the cause of death was uncertain; b) cases which have already been the subject of medical research by doctors or record drug trials; c) cases of medical research potential; d) social worker's reports and related records (e.g. personal "life testimonies" by patients – retained because of their social historical content); and e) criminal mentally disordered offender cases where the person is convicted of a serious crime e.g. homicide; f) mentally disordered offender cases where the person has been transferred to the following high secure or medium secure units: Ashworth Hospital; Broadmoor Hospital; Carstairs Hospital; Rampton Hospital; Shannon Clinic, Knockbracken.
	G9	Oncology	8 years after conclusion of treatment especially when surgery only involved.	With regard to the selection of records for medical research purposes, PRONI advises that only medical staff should select records for permanent preservation. Decisions should be based on the medical research potential of the records, e.g. on the different forms of mental disorder (genetic or otherwise) and on the different treatments.	Destroy (with the exception of Precedent Cases). Precedent Cases should be transferred to PRONI

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Health Acute & Community	G10	Patients involved in clinical trials	15 years after conclusion of treatment		When the retention period has expired 20% of the Cases should be selected at random and transferred to PRONI. In addition Precedent Cases should be identified as soon as possible and transferred to PRONI when the administrative need to keep them has ended. Selection of this material should be made in consultation with the medical professionals involved in the trials. Special Review by PRONI
	G11	Pie 1948 Records	Records in this category may already have been destroyed or sent to PRONI for permanent preservation. Any records which still exist and do not fall within any other category should be referred for a special PRONI Review.		
	G12	Private patients records admitted to hospital under Article 31 of the Health and Social Services (Northern Ireland) Order 1972	Although technically exempt from the Public Records Act (Northern Ireland) 1923, it is appropriate to treat as if they were not exempt in which case retention periods relevant to the condition apply. 8 years		Destroy
	G13	X-ray imaging (including other image formats for all imaging modalities)	8 years		Destroy
	G14	X-ray registers	8 years		Destroy
	G15	X-ray reports (including reports for all imaging modalities)	To be considered as a permanent part of the patient record 8 years		Destroy (with the exception of Precedent Cases)
	G16	Pathology records - including laboratory test results Blood transfusion records - including transfusion of blood/blood products	30 years	Directive 2002/98/EC (Blood Safety and Quality)	

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Health Acute & Community	G17	Photographs – (where the photograph refers to a particular patient it should be treated as part of the case health record)	As per case health record		Precedent Cases should be transferred to PRONI
Hospital	H1	Accident & Emergency Registers	8 years after the year to which they relate		Destroy
	H2	Admission Books	8 years after last entry		Destroy
	H3	Birth notification sheets	10 years		Special Review by PRONI
	H4	Birth registers (i.e. register of births kept by the hospital)	Lists sent to GRO on a monthly basis. 1 year		Destroy
	H5	Death registers (i.e. register of deaths kept by the hospital)	Lists sent to GRO on a monthly basis. 1 year		Destroy
	H6	Discharge books (i.e. register of those discharged by the hospital)	8 years after last entry		Destroy
	H7	Operating theatre registers	8 years after the year to which they relate		Destroy
	H8	Out-patients Lists	3 months after the date to which they relate		Destroy
	H9	Ward Registers including daily bed returns	1 year		Destroy
	H10	Record of patients property handed in for safe keeping	6 years after the end of the financial year in which the property was disposed of or 6 years after the discharge of the patient, whichever is the later		Destroy
IT	I1	Software licences	Lifetime of software		Destroy
	I2	Documentation relating to computer programmes written in-house.	Lifetime of software		Destroy
Legal	J1	Records/documents related to any form of litigation	As advised by legal advisor. All records to be reviewed. Normal review 5 years after the file is closed (see guidance).		Determined on review

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Organisation	K1	Agendas of Trust/Board/Agency Meetings (Master Copies including associated papers) Minutes of the Board/Trust Agency – major committees and sub committees (including associated papers) Agendas other Agendas, meeting papers, minutes – committees, sub committees, predecessors, professional staff/team meetings (Master Copies) Minutes – reference copies (see glossary of terms) Annual/Corporate Reports	20 years 20 years 2 years Normal review process 1 year 20 years		Transfer to PRONI Transfer to PRONI Destroy Determined on review Destroy Destroy background papers. PRONI should be added to the circulation list and a copy of each published Annual/Corporate Report sent to them. Determined on review
	K2				
	K3				
	K4				
	K5	Assembly Questions, Parliamentary Questions, MLA/MP Enquiries Business Plans including HWIPs and TDPs	10 years – Normal review process 20 years		Destroy PRONI should be added to the circulation list and a copy of each published HWIP/TDP sent to them. Destroy
	K6				
	K7	CCTV Images	To be retained for 28 days and then permanently erased unless required for evidential purposes (in line with DATA Commissioner's Code of Conduct)		

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Organisation	K8	Correspondence and other papers of minor or ephemeral importance not covered elsewhere e.g. • advertising matter • covering letters • reminders • letters making appointments • anonymous or unintelligible letters • drafts • duplicates of documents known to be preserved elsewhere (unless they have important minutes on them) indexes and registers compiled for temporary purposes • routine reports • punched cards, and • other documents which have ceased to be of value on settlement of the matter involved. Departmental Enquiries	3 years after the settlement of the matter to which it relates		Destroy
	K9		10 years - normal review process		Determined on review
	K10	Departmental Enquiries (Administrative)	Review after enquiry has ended		Determined on review
	K11	Departmental Inquiries Under Legislation	See guidance on Special Category Records in Section 7	Health and Personal Social Services (Northern Ireland) Order 1972 Article 54	All papers transferred to PRONI on completion of the inquiry
	K12	Diaries - other	5 years following the calendar year to which they relate		Destroy
		Diaries (Chief Executive)	Review 5 years following the calendar year to which they relate		Determined on review
		Diaries which contain details of staff travelling	6 years following the calendar year to which they relate		Destroy
	K13	Disposal Schedules/Indexes (documents describing public records marked for permanent preservation or containing the management of public records) background papers	Review at 10 years	Public Records Act (Northern Ireland) 1923 Disposal of Documents Order 1925	Determined on review
		Disposal Schedules (Actual Signed Schedule) or Indexes.	Permanent		A copy is permanently retained in the HPSS organisation and a copy should be sent to PRONI

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Organisation	K14	Documents more than 100 years old	Any records currently held should be referred for a special PRONI Review 7 years		Special review by PRONI
	K15	Equality and good relations: documents created or used specifically for the purposes of meeting statutory duties placed on public bodies regarding the promotion of equality and good relations, inc. Equality Schemes and background documents; documents relating to the equality-screening of policies and Equality Impact Assessments; annual statements to the Equality Commission on the implementation of the duties; equality training plans and materials.			Determined on review
	K16	Governance and quality assurance/controls records	Review 15 years		Determined on review
	K17	Guidance and Circulars received from the Department	Until cancelled or superseded		Destroy
	K18	Policy, procedures and guidelines	Until policy or procedures are revised. Review at change/revision. 1 year 1 year		Determined on review
	K19	Photographs -e.g. events, Public Relations	Review -5 years after project completed		Destroy
	K20	Press cuttings	5 years after project completed		Destroy
	K21	Project board files (excluding estates)	10 years. Close when Publication Scheme finalised		Determined on review
	K22	Project team files (excluding estates)			Destroy
	K23	Publication Scheme background papers relating to the development of the Publication Scheme			Destroy
	K24	Finalised Publication Scheme	Permanently within the Board/Trust/Agency	Freedom of Information Act 2000, Section 9	Retain permanently
	K25	Request for access to patient client/own record (DPA subject access request)	1 year following the end of the calendar year in which the request was received		Destroy
	K26	Security Pass	Retain current only		Destroy
	K27	Record of custody and transfer of keys	6 years		Destroy
	K28	Register of Board members' and Senior Managers' interests	6 years after the person leaves the organisation		PRONI

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Organisation	K29 K30 K31	Registered Staff Lists Reports (major) Research and development records (scientific, technology, medical and other)	1 year Permanent Review 5 Years after the research has been completed. Where possible review of this material should be made in consultation with medical professionals involved in the trials.		Destroy PRONI Determined on Review
	K32	Stock Control reports Stock Orders and Non Stock Orders	2 years following the end of the financial year to which they relate		Destroy
	K33	Stores records - major (stores ledgers etc)	6 years following the end of the financial year to which they relate		Destroy
	K34	Stores records - minor (requisitions, issue notes, transfer vouchers, goods received, books etc)	2 years following the end of the financial year to which they relate		Destroy
	K35	Supplies records - minor (e.g. invitations to tender and inadmissible tenders, routine papers relating to catering and demands for furniture, equipment, stationery and other supplies)	2 years following the end of the financial year to which they relate		Destroy
	K36	Training materials - manuals, videos, photographs created for the purposes of training clinical staff	Retained for as long as required for training purposes		Destroy
	K37	Unpublished material of the history of Authority or its predecessors, the organisation and procedures.	Normal review process		Determined on review
	K38	Unpublished history of hospital facility etc.	Normal review process		Determined on review

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
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Personnel This section provides general guidance on retention periods for a broad range of Personnel/Pay records. Where a type of record has not been named specifically it may be possible to determine which category it best fits.

A retention period of until "age 72" is necessary for records required for pension purposes. We have suggested a retention period of six years for records which may be required in the event of litigation purposes. The recommended retention periods are guidelines and cannot deal with each individual case. Organisations are free to seek their own legal advice where there are cases of doubt. A personnel record can be kept longer than the recommended retention period if this is in accordance with legal advice. These retention periods are based on the Guidance issued by the Cabinet Office.

L1	Annual leave cards (held by individual members of staff)	3 years			Destroy
L2	Attendance Book/Register	2 years			Destroy
L3	CVs for non-executive directors (successful)	Review 5 years following term of office			Determined on review
L4	CVs for non-executive directors (unsuccessful applicants)	2 years following application			Destroy
L5	Establishment records - Personal files	Keep for 6 years after subject of file leaves service, or until subjects 72nd birthday ... whichever is the later. Until final decision about the applicants suitability is determined	Cabinet Office guidance (Revised October 2002)		Personal files of Chief Executives. Directors should be transferred to PRONI. All other files destroyed. Destroy immediately by shredding or burning
	a. - PECS Checks (see Glossary) original information and all copies	Life of file - Age 72			Personal files of Chief Executives. Directors should be transferred to PRONI. All other files destroyed.
	- note confirming PECS check was carried out and appointment confirmed				Destroy
	b. Interview documentation	3 years	Cabinet Office guidance (Revised October 2002)		Personal files of Chief Executives. Directors should be transferred to PRONI. All other files destroyed.
	c. Letter of appointment/contracts	Life of file - Age 72			Personal files of Chief Executives. Directors should be transferred to PRONI. All other files destroyed.
	d. Copy of Annual leave entitlement				Personal files of Chief Executives. Directors should be transferred to PRONI. All other files destroyed.
	e. Application for special leave/study leave - Paid	7 years	Cabinet Office guidance (Revised October 2002)		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Personnel	L5	f. Application for special leave/study leave – Unpaid	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		g. Health declaration	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		h. Health referrals – including Medical Reports from doctors and consultants and any correspondence with the Occupational Health Service	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		i. Career Summary – Consolidated record of whole career, location details	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		j. Change of grade notification	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		k. Part-time/Job sharer/Term time applications, decisions	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		l. Change of address	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		m. Personal Information (supplied by the individual)	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		n. Medical/Self certificates unrelated to Industrial Injury (see also L15)	4 years	Cabinet Office guidance (Revised October 2002)	Destroy
		o. Resignation/termination/ retirement letters	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Destroy
		p. Record of location of overseas service	Life of file – Age 72	Cabinet Office guidance (Revised October 2002)	Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Personnel	L5	q. Annual/Assessment Reports	5 years	Cabinet Office guidance (Revised October 2002)	Destroy
		Chief Executive/Directors Annual/Assessment Reports	Retain permanently in personal file	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI
		r. Annual/Assessment Report where appeal or legal proceedings are underway	5 years from the result of the appeal	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		s. Report of Appeal	Age 72		
		t. Annual/Assessment Reports for last 5 years of service	5 years	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		u. Performance Appraisal Interview Sheet	Life of file - Age 72	Cabinet Office guidance (Revised October 2002)	Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		v. Commendations	Retain for 5 years		Destroy
		w. Medical Report of those exposed to a substance hazardous to health, including Lead	Life of file - Age 72		Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
		Asbestos		Control of Lead at Work Regulations (Northern Ireland) 1988	40 years from date at which entry was made
		Radiation		Control of Asbestos at Work Regulations (Northern Ireland) 1988	40 years from date of last entry
	L6	Disciplinary Records - Papers relating to disciplinary action which has resulted in any change to terms and conditions of service, salary, performance pay or allowances.	Life of file - Age 72	Ionising Radiations Regulations (Northern Ireland) 2000	50 years from date of last entry.
	L7	Duty rosters clock cards, time sheets.	2 years		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Personnel	L8	Forms – all duplicate superannuation SD55A, B, C, & D, SD502, SS10 and their successors for subsequent quinquennia.	10 years following the cessation of superannuation payments to the beneficiary or to his/her dependants 0.5 year		Destroy
	L9	FWH – Personal record of hours actually worked			Destroy
	L10	History records of pay scales	Permanent		Retain permanently
	L11	Industrial relations (not routine staff matters)	Normal review process		Determined on review
	L12	Job applications (following termination of employment)	3 years		Destroy
	L13	Job applications – Unsuccessful - Documents - Interview Documentation - Note confirming that a PECS check was carried out and offer of appointment withdrawn - Equality Monitoring returns	1 year 3 years Life of file – Age 72		Destroy
	L14	Job descriptions (following termination of employment)	3 years 3 years		Destroy
	L15	Leavers dossiers (provided a summary retained)	6 years after subject leaves the service		Destroy
		Summary (retained on file)	Life of personal file – Age 72		Personal files of Chief Executives, Directors should be transferred to PRONI. All other files destroyed.
	L16	Papers relating to any injury on duty			Destroy
	L17	Personal Payroll History: Records of pay Performance pay Overtime pay Allowances Pay enhancements Taxable allowances Payment for untaken leave Reduced pay Maternity leave Absence Record Study leave applications	Until Age 72 Life of file – Age 72.		Destroy
	L18		2 years		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Personnel	L19	Subject Access Requests and responses (staff requests)	1 year following the end of the calendar year in which the request was received.		Destroy
	L20	HRMS	Keep for 6 years after subject leaves service, or until subjects 72nd birthday - whichever is the later		Destroy
	L21	Superannuation: Accounts	10 years		Destroy
		Registers	10 years		Destroy
		Death benefit nomination form	Until subject reaches 72 (Return originals to provider)		Destroy
		Death certificates	Retain copy until Age 72		Destroy
	L22 L23 L24	Decree absolutes	(Return originals to provider)		Destroy
		Marriage certificates	Retain copy until Age 72		Destroy
		Unpaid leave periods	Until subject reaches 72		Destroy
		Pensions estimates/awards	Until subject reaches 72		Destroy
		Added voluntary contributions	Until subject reaches 72		Destroy
		Added years	Until subject reaches 72		Destroy
		Tax forms - change of tax code	7 years		Destroy
		Income Tax form P45	Life of file - Age 72		Destroy
		Wages/Salary records:			Destroy
		- Bank details - current only	6 years after employment has ended		Destroy
		- Category analysis print outs	2 years after employment has ended		Destroy
		- Clock cards and time sheets	3 years after employment has ended		Destroy
		- Computer payroll printout	7 years after employment has ended		Destroy
		- Cumulative adjustment forms	2 years after employment has ended		Destroy
		- Payment analysis print outs	2 years after employment has ended		Destroy
		- Pay sheets and records of unpaid salaries and wages	10 years after employment has ended		Destroy
		- Personal record forms	7 years after employment has ended		Destroy
					Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Personnel Continued	L24	<ul style="list-style-type: none"> - Statutory maternity pay documents - Temporary variation forms - Trade Union Schedules - Salary requests from bank/building society pay details - Overpayment documentation - Performance Pay - Special Bonus Papers - Third party client/advances in lieu of pay - Eyesight test documents - Staff photographs - held in personal file 	<ul style="list-style-type: none"> 6 years after employment has ended 3 years after employment has ended 1 year after employment has ended 1 year only 6 years after repayment or write-off 7 years 7 years 6 years after repayment Retain current only Lifetime of file - Age 72 		<ul style="list-style-type: none"> Destroy Destroy Destroy Destroy Destroy Destroy Destroy Destroy Destroy Disposal method of Personal file refers Destroy Destroy Destroy
	L25				
	L26	Training records - all staff	72 years		Destroy
	M1	Activation Reports	2 financial years		Destroy
	M2	Adverse Medicine related incidents	2 years following the financial year to which they relate		Destroy
	M3	Area Stores/HSDU & Miscellaneous Deliveries	2 years		Destroy
	M4	Batch Records	2 financial years		Destroy
	M5	Controlled Drug (CD) Requisitions	2 years	Misuse of Drugs (Northern Ireland) Regulations 1986	Destroy
	M6	CIVA Prescriptions	13 years		Destroy
	M7	CIVA Work Sheets	13 years		Destroy
Pharmacy	M8	Clinical Trials	15 years		Destroy
	M9	Consultant authorisation letters for unlicensed medicines to patient	13 years		Destroy
	M10	Controlled Drugs Registers	13 years		Destroy
	M11	Customer Usage Reports	2 years		Destroy
	M12	Cytotoxic Prescriptions	13 years		Destroy
	M13	Cytotoxic Work Sheets	13 years		Destroy
	M14	Discharge and Specialist Medicines Prescriptions	13 years		Destroy
	M15	Drug Information Queries	13 years		Destroy
	M16	Fax Print Outs	2 years		Destroy
	M17	Free of Charge (FOC) Goods	2 years		Destroy
	M18	Fridge Temperature	10 years		Destroy
	M19	Gas Testing Documentation	13 years		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Pharmacy	M20	Invoice Copies	2 years		Destroy
	M21	Letters/Memos	13 years if applies to patient treatment		Destroy
	M22	List of Drugs/Batch No./Expiry Date for Ambulances/Ambulance Bags	3 years		Destroy
	M23	List of Users Ids & Privileges	2 years		Destroy
	M24	Medicine Record Sheet	13 years		Destroy
	M25	Medicine Transfer Forms	2 years		Destroy
	M26	On-Call Records	2 years		Destroy
	M27	Orders	2 years		Destroy
	M28	Paediatric Scripts Total Parental Nutrition (TPN)	21 years		Destroy
	M29	Patient Counselling Sheet	13 years		Destroy
	M30	PCA Work Sheets	13 years		Destroy
	M31	Postal Medicines to Patients	2 years		Destroy
	M32	Pharmacokinetics	13 years		Destroy
	M33	Pharmacy Controlled Drug Registers	13 years		Destroy
	M34	Picking Lists	2 years		Destroy
	M35	Product Defect Forms	No legal/statutory requirements - 5 years		Destroy
	M36	Product Recall - DHSSPS & Ward Recall Records	No legal/statutory requirements - 5 years		Destroy
	M37	Quality Control Documentation	13 years		Destroy
	M38	Returns Dockets	2 years following the financial year to which they relate		Destroy
	M39	Security Reports	2 years following the financial year to which they relate		Destroy
	M40	Skin Clinic Prescriptions	13 years		Destroy
	M41	Special Manufacturing or Extemporaneous Dispensing Worksheets	13 years		Destroy
	M42	Stock Adjustments	7 years		Destroy
	M43	Stock Checks	2 years		Destroy
	M44	Stock/Non-Stock Requisition Books	2 years		Destroy
	M45	Total Parental Nutrition (TPN) Prescriptions	13 years		Destroy
	M46	Total Parental Nutrition (TPN) Work Sheets	13 years		Destroy
	M47	Transfer of Information to Community Pharmacist	13 years		Destroy
	M48	Unlicensed Medicines Prescription and Dispensing Records	13 years		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Pharmacy	M49	Usage by Financial Code of Items Issued to Users	2 years following the financial year to which they relate	Misuse of Drugs (Northern Ireland) Regulations 1986 (Temazepam)	Destroy
	M50	Ward Requisition & Temazepam Regs.	2 years		Destroy
Regulation and Inspection	M51	Workload & Owings	2 years following the financial year to which they relate		Destroy
	N1	Records in relation to the registration of agencies e.g. adoption, fostering, domiciliary care, early years and nursing agencies	Until registration is revised/amended. Records should be reviewed at this point.		Determined on review
	N2	Records in relation to the inspection and monitoring of agencies	Records should be reviewed when they are 8 years old.		Determined on review
	N3	Records relating to the registration of establishments e.g. hospices, independent healthcare providers, nursing homes, residential homes.	Until registration is revised/amended. Records should be reviewed at this point.		Determined on review
	N4	Records relating to the inspection and monitoring of establishments.	Records should be reviewed when they are 8 years old.		Determined on review
	N5	Early years' services - records related to the registration of any prescribed service provision, includes evidence that relevant statutory and police checks on individuals have been carried out (Reference "Making the Right Choice"). Early years' services include e.g. childminders, playgroups, day nurseries, crèches, after school clubs.	Until registration is revised/amended. Records should be reviewed at this point.		Determined on review
	N6	Early years' services - records related to the inspection and monitoring of any prescribed service provision.	Records should be reviewed when they are 30 years old.		Determined on review
	N7	Schools with boarding departments - records related to the registration of the boarding department.	Until registration is revised/amended. Records should be reviewed at this point.		Destroy
	N8	Schools with boarding departments - records related to the inspection of the boarding department.	Records should be reviewed when they are 30 years old.		Determined on review
	N9	Children's homes - records related to the inspection of the home.	75 years after creation.		Transfer to PRONI

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Regulation and Inspection	N10	Children's homes - records related to the inspection of the home.	30 years after creation		Transfer to PRONI
	N11	Records in relation to the inspection and monitoring of clinical and social care governance arrangements.	Records should be reviewed when they are 8 years old		Determined on review
	N12	Records in relation to the regulation of the workforce.	Lifetime of the Registrant plus 10 years		Transfer to PRONI
Social Services - Adult	N13	Records in relation to the regulation of professional training.	25 years after a programme is wound up		Transfer to PRONI
	O1	Client case files (all Programmes of Care) e.g. individual/case records, case management records.	8 years after closure or death of individual.		Destroy (with the exception of Precedent Cases). Precedent Cases should be identified ASAP and transferred to PRONI. Determined on review
	O2	Day Support Services - administrative records relating to the running of the establishment/service e.g. day centre, adult centres, outreach schemes.	Review 8 years after calendar year to which they relate.		
	O3	Day Support Services - Individual's case records/notes related to activity within the service/home.	8 years after closure of case or death of individual.		Destroy (with the exception of Precedent Cases). Precedent Cases should be identified ASAP and transferred to PRONI. Destroy
	O4	Home Support Services - administrative records relating to the running of the service e.g. home help, domiciliary, sitting services, in-home respite.	8 years after calendar year to which the papers relate. Any papers, which cover the policy of how Home Support Services are administered, should be reviewed. Normal review process.		Determined on review
	O5	Offenders - Records in relation to offenders, including notifications from other Agencies under Circular HSS (CC) 3/96, Arrangements and Management of Sex Offenders Procedures.	75 years from date of conviction/notification	Rehabilitation of Offenders (Northern Ireland) Order 1978	Transfer to PRONI. In accordance with a guideline set down by the NIO such material remains closed until the person would be deemed to have reached the age of at least 95 years.

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation / Source	Final Action
Social Services - Adult	06	"One-off records", subject to risk assessment, e.g. straightforward requests for advice, financial assistance, benefit enquiries, housing enquiries, inappropriate referrals, Registers: Sensory impairment, physical disability, learning disability, dementia, Residential homes – administrative records pertaining to the running of the establishment e.g.:	3 years after closure.		Destroy
	07	a. A copy of the statement of the aims and objectives of the home, of the care and attention to be provided and arrangements for supervision of residents;	30 years		Determined on review
	08	b. A daily register of all residents;			
		c. A record of all medicines kept in the home and arrangements for disposal when no longer required.	Records should be reviewed 3 years from date of last entry.	The Residential Care Homes Regulations (Northern Ireland) 1993; Reg.6 and Schedule 4	Destroy
		d. A record of inspection visits.	3 years from date of last entry.		Destroy
		e. A statement of facilities provided for residents and arrangements made for visits by relatives.	"		Destroy
		f. Records of food provided for residents.	"		Destroy
		g. A record of every fire practice and every fire alarm test carried out and a statement of the fire procedure.	"		Destroy
		h. A record of each person employed at the home.	"		Destroy
		i. A record of any visit to the home.	"		Destroy
		j. A record of procedure to be followed in event of an accident or resident becoming missing.	"		Destroy
		k. A record of the scale of charges applicable.	"		Destroy
		l. A record of money or other valuables deposited by a resident.	"		Destroy
		m. A record of verbal or written complaints (see also complaints).	"		Destroy
		n. A record of any notice of termination of accommodation.	"		Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Social Services - Adult	O9	Residential homes - individual's case records/notes related to activity within the service/home.	8 years after closure of case or death of individual.		Destroy (with exception of Precedent Cases). Precedent Cases should be identified ASAP and transferred to PRONI
	P1	Adoption - Children's case records and indexes to case records; in-country tracing; inter-country tracing.	75 years from adoption. In cases of non-approval, 30 years after closure of the case.	The Adoption Agencies Regulation (Northern Ireland) 1989 Reg. 14	Transfer to PRONI
Social Services - Children	P2	Adoption - Applicant's case records approval/non-approval/withdrawn/uncompleted applications; placement, post adoption work, support/counseling.	75 years from adoption. In cases of non-approval/withdrawn/uncompleted applications, 30 years after closure of the case.	The Adoption Agencies Regulation (NI) 1989 Reg. 14	Transfer to PRONI
	P3	Adoption - case records of birth parents and related support work pre and post adoption.	At least 75 years from adoption.		Transfer to PRONI
	P4 P5	Adoption Panel Records. Case records of Looked After Children who are placed at home with their parents.	75 years after creation. 75 years from date of birth or if the child dies before age 18 then retain for 15 years from his/her death.	The Arrangements for Placement of Children (General) Regulations (NI) 1996 Reg. 9(1)	Transfer to PRONI Transfer to PRONI
	P6	Case records related to Children and Young People subject to public and private law applications and/or orders, excluding Looked After Children, e.g. • Article 4/Article 56 reports to the court; • 'wards of court' where care and control rests with a parent or other family member; • contact orders; • supervision orders, etc.	20 years from closure or 15 years after the child's death.		Transfer to PRONI
	P7	Children's homes - all records confidential pertaining to the personal details of the child (as noted under Schedule 2).	Review 75 years from date of birth or 15 years after death of child if child dies before attaining the age of 18.	The Children's Homes Regulations (Northern Ireland) 1996 - Reg. 15 and Schedule 2	Determined on review

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Social Services Children	P8	Children's homes – statutory records maintained under Schedule 3 of the Children's Homes Regulation e.g.:	15 years from date of last entry	The Children's Homes Regulations (Northern Ireland) 1996 – Reg.17 and Schedule 3	Transfer to PRONI
		a. A record showing the date each child was first accommodated, and ceased to be accommodated, in the home; where the child came from before he was accommodated in the home and where he went when he ceased to be accommodated in the home; who was responsible for placing the child in the home and which children in the home are being looked after by any organisation and under what legal authority.			
		b. A record showing details of every employee;			Destroy
		c. A record of all other persons resident at the home;			Destroy
		d. A record of accidents occurring in the home;			Destroy
		e. A record of medicines administered to any child;			Destroy
		f. A record of every fire drill or fire alarm test;			Destroy
		g. A record of all money and valuables deposited for safekeeping and the date of withdrawal or return;			Destroy
		h. A record of all accounts kept in the home;			Destroy
		i. A record of every disciplinary measure imposed;			Destroy
		j. A record of duty rosters;			Destroy
		k. A daily log of events occurring in the home;			Destroy
		l. A record of menus.	1 year	The Children's Homes Regulations (NI) 1996 – Reg.17(2)	Destroy

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Social Services Children	P9	Child Protection case files from initial referral through to closure.	75 years after closure or 15 years after the child's death.		All census years files to be transferred to PRONI. Destroy all others. Transfer to PRONI
	P10	Child Protection Register/including enquiries.	75 years after creation of the record.		Destroy
	P11	Early Years Services – administrative records relating to the running of the service.	8 years after the calendar year to which they relate.		Destroy (with the exception of precedent cases). Precedent cases should be identified ASAP and transferred to PRONI
	P12	Family Support – records relating to disabled children and their families, which include social work records and family centre records relating to these individuals/families, includes registers of disabled children.	20 years after closure of case/last entry in register.		Destroy (with the exception of precedent cases). Precedent cases should be identified ASAP and transferred to PRONI
	P13	Family Support – general: records relating to family support which include social work records and family centre records relating to individuals/families, including work related to the supervision of children and young people e.g. in relation to: • children in need who are not looked after and who are not on the Child Protection Register.	20 years after closure of case.		Destroy
	P14	Foster Care – Applicant's records, approval post-placement and support including contact records with foster families e.g. "foster care diaries".	10 years from date of which approval is terminated or death of a surviving foster parent if earlier. 30 years from date of decision.	The Foster Placement (Children) Regulations (Northern Ireland) 1996 Reg.14	Destroy
	P15	Foster Care – Applicant's records non-approval/uncompleted applications.	25 years after closure of the case or until 15 years after the death, if earlier.		Destroy
	P16	Foster Care records related to Private Foster Carers and children who are privately fostered (under Part X of the Children Order) where child/children are not looked after.	75 years after completion.		Transfer to PRONI
	P17	Foster Care – Panel records, minutes, papers and related registers.	75 years from date of birth or if the child dies before age 18 then retain for 15 years from his/her death.		Transfer to PRONI
	P18	Foster Care – Looked After Children, child's records, register(s) of children in foster care by and within the Trust.			

Work Area	Ref	Record Type	Minimum Retention Period	Relevant Legislation/Source	Final Action
Social Services Children	P19	Home Support services – administrative records related to service provision e.g. home help, domiciliary, family aide, in-home respite.	20 years from closure of the case		Destroy
	P20	Independent Visitors – Records related to the recruitment, selection, training and support and review and termination of Independent Visitors.	25 years after termination of role as an Independent Visitor.		Destroy
	P21	"One-off records", subject to risk assessment, e.g. straightforward requests for advice, financial assistance, benefit enquiries, housing enquiries, inappropriate referrals.	3 years after closure		Destroy
Statistics	Q1	Körner records, regional annual statistical returns required by the Department, payment activity data	3 years from submission to Department		Destroy
	Q2	Laboratory records	8 years		Destroy

APPENDIX B

LIST OF USEFUL CONTACTS

The Departmental Records Officer – Concerning issues in this guidance, or wider records management issues and electronic administrative records.

Department of Health, Social Services and Public Safety
Room A3.7, Castle Buildings, Stormont, Belfast BT4 3SQ

Tel: **GRO-C**
Fax: **GRO-C**
Web: www.dhsspsni.gov.uk

The Departmental Information Officer – Concerning Data Protection or Freedom of Information issues.

Department of Health, Social Services and Public Safety
Room A 3.9, Castle Buildings, Stormont, Belfast BT4 3SQ

Tel: **GRO-C**
Fax: **GRO-C**
Web: www.dhsspsni.gov.uk

DHSSPS General Medical Services Branch - Concerning general practitioner (GP records)

Room D3, Castle Buildings, Stormont, Belfast BT4 3SQ

Tel: 028 9052 0238
Fax: 028 9058 9624
Email: Shella.Barfoot@dhsspsni.gov.uk **GRO-C**

The Public Record Office of Northern Ireland – Concerning long term archiving of selected material –

Records Management and Administrative Section,
Balmoral Avenue, Belfast BT9 6NY

Tel: 028 9025 5830, 028 9025 5848 for transfer of records)
Fax: 028 9025 5999
Web: www.proni.gov.uk

National Preservation Office

The British Library
96 Euston Road, London NW1 2DB

Tel: 020 7412 7612
Fax: 020 7412 7796
Email: npo@bl.uk
Web: www.bl.uk

Information Commissioner and Data Protection Registrar

Marie Anderson

Information Commissioners Office

Regus House, 33 Clarendon Dock, Laganside, Belfast BT3 1BG

Tel: **GRO-C**

Web: www.informationcommissioner.gov.uk

Lord Chancellors Department

Selborne House

54-60 Victoria Street

London SW1E 6QW

Tel: 020 7210 8764

Fax: 020 7210 8566

Web: www.open.gov.uk/ucd

Customs and Excise – UK Customs and Excise is a Government Department with responsibility for collecting billions of pounds in revenue each year in VAT, other taxes and customs duties

Customs House, Customs Square, Belfast

Tel: 0845 010 9000

Web: www.hmce.gov.uk

General Medical Council

178 Great Portland Street, London W1W 5JE

Tel: 020 7580 7642

Fax: 020 7915 3641

Email: gmc@gmc-uk.org

Web: www.gmc-uk.org

Nursing and Midwifery Council (NMC)

23 Portland Place, London W1B 1PZ

Tel: 020 7637 7181

Fax: 020 7436 2924

Email: advice@nmc-uk.org

Web: www.nmc-uk.org

General Dental Council

37 Wimpole Street, London W1M 8DQ

Tel: 020 7887 3838

Fax: 020 7224 3294

Email: recertification@gdc-uk.org

Web: www.gdc-uk.org

Pharmaceutical Society of Northern Ireland

73 University Street, Belfast BT7 1HL

Tel: 028 9032 6927

Fax: 028 9043 9919

Email: Sheila.maltby@**GRO-C**

Web: www.pharmacy/psni

Health Professions Council

Council for Professions Supplementary to Medicine

Park House, 184 Kennington Park Road, London SE11 4BU

Tel: 020 7582 0866

Fax: 020 7820 9684

Email: hpc-uk-org

Web: cpom.org.uk

Northern Ireland Social Care Council

7th Floor, Millennium House, Great Victoria Street, Belfast BT2 7AQ

Tel: 028 9041 7600

Fax: 028 9041 7601

Web: www.niscc.info

Publications

The DHSSPS Publication Scheme facilitates greater public access to information held by the Department. It details information which is available now or will be available in the future, where it can be obtained from, the format it is available in and whether the material is available to the public free of charge or on payment.

The Publication Scheme can be viewed on the DHSSPS web site:

www.dhsspsni.gov.uk/foi/foi_publicscheme.asp or at your local library.

Appendix C

FORMS

CONTENTS

Form 2PR – Closure Sheet

THIS FILE IS CLOSED

**NO FURTHER PAPERS
ARE TO BE ADDED**

A New File:

- (a) has been opened (No.....)
- (b) will be opened on request

Delete as applicable

Form 2PR Closure Sheet

Appendix D

Steering Group Members

Chairman	-	Dr Ian Carson
Members	-	Billy Baird Sheila Barfoot Jonathan Bill Mark Eustace Norma Evans Eddie Finn Gerry Gault David Hunter Ray Martin Brian Marsh Nuala McArdle Noel McCann Marie McMahon Dr Glenda Mock Dr Heather Neagle Donncha O'Carolan Niki Patterson David Reilly Robert Woodside

ACKNOWLEDGEMENT

The Department of Health, Social Services and Public Safety would like to thank all those who provided help, support, comment and participated in any way to the development of this guidance.

- Eastern Health & Social Services Board
- Northern Health & Social Services Board
- Southern Health & Social Services Board
- Western Health & Social Services Board
- Craigavon & Banbridge Community HSS Trust
- Newry & Mourne HSS Trust
- North & West Belfast HSS Trust
- Causeway HSS Trust
- Foyle HSS Trust
- Sperrin Lakeland HSS Trust
- Down Lisburn HSS Trust
- Ulster Community & Hospitals HSS Trust
- South & East Belfast HSS Trust
- Armagh & Dungannon HSS Trust
- Homefirst Community Trust
- Belfast City Hospital HSS Trust
- Royal Group of Hospitals & Dental Hospital HSS Trust
- Craigavon Area Hospital Group HSS Trust
- Altnagelvin Hospitals HSS Trust
- NI Ambulance Service HSS Trust
- Green Park HSS Trust
- Mater Hospital HSS Trust
- United Hospitals HSS Trust
- NI Regional Medical Physics Agency
- NI Blood Transfusion Service Agency
- NI Fire Brigade
- NI Social Care Council
- Central Services Agency for the HPSS
- NI Health Promotion Agency
- NI Guardian Ad Litem Agency
- NI Medical & Dental Training Agency
- Northern Ireland Practice and Education Council [NIPEC]
- Mental Health Commission
- Southern Health and Social Services Council
- Northern Health and Social Services Council
- Western Health and Social Services Council
- Eastern Health and Social Services Council
- Northern Ireland Postgraduate Council for Medical and Dental Education [NIPCMDE]
- The Public Record Office of Northern Ireland
- Departmental Solicitors Office

GLOSSARY OF TERMS

Agency

An "agency", under Article 8 of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, is taken to mean:

- a) a domiciliary care agency;
- b) a fostering agency;
- c) an independent medical agency;
- d) a nursing agency;
- e) a voluntary adoption agency; or
- f) such other agency as may be specified by order under Article 8 Paragraph (3) of the Order.

Ashworth Hospital

Ashworth Hospital is part of the NHS and is one of three special hospitals serving primarily England and Wales.

Postal address: Ashworth Hospital, Parkbourn, Maghull L31 1HW

Audit Record

Records of internal audits

Best Practice – Best Care

"Best Practice – Best Care" defines clinical and social care governance as a framework within which HPSS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care and treatment.

Branch

The term can mean unit, business area, service/service area, division, directorate, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Broadmoor Hospital

Broadmoor is a secure mental hospital in Crowthorne in Berkshire. It is the best known of the three high security hospitals in England. The complex houses 326 patients many of which have personality disorders, and/or have been convicted of serious crime.

Postal address: Broadmoor Hospital, Crowthorne, Berks RG45 7EG

Business Area

The term can mean unit, service/service area, branch, division, directorate, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Business Plans

A yearly look at what the department plans to achieve in the forthcoming year.

Cabinet Office Guidance

Guidance on Personnel record keeping issued by the Cabinet Office, Corporate Development Group, Admiralty Arch, The Mall, London

CCTV

Recordings made by Close Circuit Television cameras.

Carstairs Hospital

The only high security hospital in Scotland providing secure forensic psychiatric care, located in central Scotland midway between Glasgow and Edinburgh. The 550 staff provide this care 24 hours a day, every day of the year for around 250 patients from Scotland and Northern Ireland.

Postal address: The State Hospital, Carstairs, Lanark, Scotland ML11 8RP

Census Year

The year a census was carried out. A census is normally held every 10 years. The last 4 censuses were carried out in 1971, 1981, 1991 and 2001. The next census is due to take place in 2011.

Child In Need

A child who is unlikely to achieve or maintain a reasonable standard of health or development, or his health or development is likely to be significantly impaired without the provision of services by an authority, or is disabled.

Child Protection

Agreed procedures for use by people working with children to avoid or recognise abuse (physical emotional and sexual) and advising of steps to be followed to involve the appropriate agencies.

Children

Persons under the age of 18

Clinical and Social Care Governance

Clinical and Social Care Governance is about organisations taking corporate responsibility for performance and providing the highest possible standard of clinical and social care.

Closing a File

The action of closing a file containing documents on which action has been completed and to which no more documents will be added.

Conclusion of treatment

Discharge of the patient/client from the care of the consultant back to the GP.

Contract

Legally enforceable binding agreement between parties.

Data Protection Act

The Act is concerned with personal data, that is, any data relating to an individual who can be identified.

Department

The Department of Health, Social Services and Public Safety.

department

The term can mean unit, business area, branch, division, directorate, service/service area. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Departmental Information Manager

An officer who has a duty to provide advice, guidance and general support to all grades of staff within the Department on matters relating to the Freedom of Information Act 2000 and the Data Protection Act 1998.

Departmental Records Officer

An officer, appointed by the Permanent Secretary, who has a duty to provide advice, guidance and general support to all grades of staff within the Department of Health Social Services and Public Safety on matters relating to Records Management.

Destroy

The record should be destroyed.

DIM

See Departmental Information Manager.

Disposal Schedule

A Disposal Schedule is a document which outlines all types of records held within a Branch, the period for which such records should be retained and the action required when the retention period has been reached.

Directorate/directorate

The term can mean unit, business area, branch, division, service/service area, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Division/division

The term can mean unit, business area, branch, service/service area, directorate, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Donor Records

Personal details and information relating to an individual and their donation of blood or tissue.

DRO

See Departmental Records Officer.

Early Years

Babies, children or young people up to 14 (or up to 16 with Special Education Needs or a disability)

EDRMS

See Electronic Document and Records Management Systems

EIR

Environmental Information Regulations

Electronic Document and Records Management Systems

An electronic means of capturing electronic documents and handling them according to best practice using metadata in a shared environment.

Establishment

An "establishment", under Article 8 of The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, is taken to mean:

- a) a children's home;
- b) a day care setting;
- c) an independent clinic;
- d) an independent hospital;
- e) a nursing home;
- f) a residential care home;
- g) a residential family centre; or
- h) such other establishment as may be specified by order under Article 8 paragraph (3) of the Order.

File Category Thesaurus

A class and folder naming mechanism that is based on controlled vocabulary terms and relationships. This controlled vocabulary or keywords should be chosen from a Key List which is the File Category Thesaurus.

File

An accumulation of records maintained in a predetermined physical arrangement.

File titling

Accurate file titling is essential for an efficient filing system. The title of every file should accurately reflect its contents.

FOI

See Freedom of Information Act.

Freedom of Information Act 2000

The Act allows for any person to make a request for information, and to be told whether the public authority holds the information, and subject to exemptions, to be supplied with the information.

Health and Personal Social Services (HPSS)

Includes hospital services, community health services, personal social services and general medical services.

HPSS ICT Security Policy

An ICT security policy for HPSS Organisations issued in August 2002 by the Directorate of Information Systems DHSSPS, which establishes the baseline security principles to which such organisations must confirm.

Information Access Request

A request from a person for information. They are entitled to be told whether the public authority holds the information, and subject to exemptions, to be supplied with the information.

Information Audit

An information audit looks at the means by which an information survey, gathering of information about records created or processed by an organisation, will be carried out and what it intends to capture.

Information Commissioner

The Information Commissioner enforces and oversees the Data Protection Act 1998 and the Freedom of Information Act 2000.

Körner Records

Patient activity data.

Looked after Child

A child who is in the care of the authority and provided with accommodation by the authority for a continuous period of more than 24 hours.

Making the right choice

A guide to using the pre-employment consultancy service published by the DHSSPS.

Maternity Records

All obstetric and midwifery records including those of episodes of maternity care that end in still birth or where the child later dies.

Mental Disorder

Mental illness, mental handicap and any other disorder or disability of mind as defined in Article 3 of the Mental Health (Northern Ireland) Order 1986.

Metadata

Data used to describe data.

Minutes (master copies)

Master copies are the copies held by the secretariat of the meeting, i.e. the person or branch who actually takes, writes and issues the minutes.

Minutes (reference copies)

Copies held by individual attendees at a given meeting.

National Archives

New name for Public Records Office in Great Britain.

Normal Review Process

The reviewing of files when they reach 10 years old.

NIRMS

See Northern Ireland Records Management Standard.

Northern Ireland Records Management Standard

Standard for Records Management produced by PRONI in March 2002. The standard is updated regularly to take account of emerging Freedom of Information issues.

Obstetric Records

Maternity care records including cases of stillbirth, Child Death and children born with a handicap.

Office of the e-Envoy

e Government Unit, Cabinet Office, Stockley House, 130 Wilton Road, London SW1V 1LQ.

One-off Enquiries

Single enquiries not related to any previous issue or correspondence.

PECS checks

A vetting service to help organisations make informed decisions about applicants. Procedures on how PECS works is covered in the booklet "Making the Right Choice".

Permanent Secretary

The administrative head of the Department working directly to the Minister.

Precedent Case

Something with a wider importance than its own immediate circumstances or something carried out, used, researched, trialed, which may serve as an example to authorise a subsequent act of the same kind e.g.:

The first time a procedure was used;

The first time a certain product or piece of equipment was used;

The first time a new procedure, product or piece of equipment was used on certain groups of patients.

PRONI

See Public Record Office of Northern Ireland.

Public Records Act (NI) 1923

All files created by public servants as part of their everyday work, are defined as public records under the terms of the Public Records Act (NI) 1923.

Public Record Office of Northern Ireland

The Public Records Act (Northern Ireland) 1923 established PRONI as the national archive centre for Northern Ireland with authority to receive those records of government departments and public bodies which are deemed worthy of permanent preservation. PRONI is part of the Department of Culture, Arts and Leisure.

Protectively Marked Files

Categories of file markings depending on the level of security required for the material.

Publication Scheme

A publication scheme details information which is available to the public now or will be available in the future, where it can be obtained from and the format it is available in.

Rampton Hospital

Rampton Secure Hospital is home to some of the most dangerous people in Britain, with 3 out of 4 of its 400 patients responsible for "very serious crime".

Postal address: Rampton Hospital, Retford, Nottinghamshire DN22 0PD

Record

Books, papers, maps, photographs, machine readable materials or other documentation created or maintained as evidence of a business activity (see para 6.1 for further clarification)

Records Management

Management of information using recognised standards.

Register

An official written (either on hard copy or computer) record of names or events or transactions.

Reverse book method

Practice of filing the latest paper on top of a series of papers.

Review

Records are examined or reviewed in order to determine if they are worthy of destruction, retention, or permanent preservation.

Service

The term can mean unit, business area, branch, division, directorate, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Service Level Agreement

Agreement between parties setting out the agreed level of service. Usually a supplementary document to a contract.

Shannon Clinic

A new medium secure unit within Knockbracken Health Care Park, Saintfield Road, Belfast BT8 8BH to accommodate 34 patients. The unit is due to open in January 2005.

Special Category Record

Class of material that may need special arrangements for registration or review.

Subject Access Request

Request for information held about an individual made by that individual to a person or organisation that they believe holds the information.

Supervision Order

A Supervision Order is one of the sentences that a Court can give to a young person aged between 10 and 17 years to help a young person so that they cannot re-offend.

Transfer to PRONI all files for each census year

All files where the minimum retention period has expired during a census year e.g. patient died 1993 – minimum retention period expires in 2001. 2001 is a census year, so file is transferred to PRONI.

Transplant Records

Personal details and information relating to an individual who has received a donation of tissue.

Unit

The term can mean service, business area, branch, division, directorate, department. It is the term used to define the breakdown of groups of people with the same purpose within the organisation. The name used for the breakdown within organisations can differ.

Videos

Film recorded on video cassette.

ABBREVIATIONS

APL	Equipment
BS	British Standard
CAD	Computer Aided Design
CCTV	Close Circuit Television
CD	Controlled Drugs
CD ROM	Compact Disk Read Only Memory
CIVA	Central Intravenous Additives
CV	Curriculum Vitae
DCAL	Department of Culture, Arts & Leisure
DHSSPS	Department of Health, Social Services and Public Safety
DN	Delivery Note
DPA	Data Protection Act
DRO	Departmental Records Officer
EDRMS	Electronic Document and Records Management System
EHSSB	Eastern Health and Social Services Board
EIR	Environmental Information Regulations
FOC	Free of Charge
FOI	Freedom of Information
FWH	Flexible Working Hours
GMGR	Good Management, Good Records
GOV	Government
GP	General Practitioner
GRO	General Records Office
HOSP	Hospital
HSC	Health and Safety Circular
HSS	Health and Social Services
HPSS	Health and Personal Social Services
HSDU	Hospital Sterilisation and Decontamination Unit
HWIP	Health and Wellbeing Investment Plan
ICT	Information Communications Technology
ISO	International Organisation for Standardisation
LAC	Looked after Child
LCD	Lord Chancellor's Department
LRM	Local Records Manager
NI	Northern Ireland
NIRMS	Northern Ireland Records Management Standard
NHS	National Health Service
PAS	Patient Administrative System
PAYE	Pay as you earn
PECS	Pre-Employment Consultancy Service
PCA	Patient Controlled Analgesia
PRONI	Public Record Office of Northern Ireland
REF	Reference
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences NI 1997
RMO	Records Management Officer
SLA	Service Level Agreement
SMT	Senior Management Team

TDP	Trust Delivery Plan
TPN	Total Parental Nutrition
UK	United Kingdom
VAT	Value Added Tax
VFM	Value for Money

Produced by:
Department of Health, Social Services and Public Safety
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December 2004

Ref: 218/2004

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